DOCUMENT RESUME

ED 185 735 EC 123 574

AUTHOR	Gillespie-Silver, Patricia; And Others
TITLE	The Individualized Educational Plan: A Decision-Making Process. A Student-Centered Approach to Training. Participant's Manual. Revised Edition.
SPONS AGENCY	Massachusetts State Dept. of Education, Boston. Bureau of Special Education.; Northeast Regional Resource Center, Hightstown, N.J.
PUB DATE	Apr 79
NOTE	386p.; For the trainer's manual see EC 123 575.
AVAILABLE FROM	Connections Publications, 52 Lee St., Cambridge, MA 02139
EDRS PRICE	MF01/PC16 Plus Postage.
DESCRIPTORS	*Decision Making Skills; *Delivery Systems; *Disabilities; Elementary Secondary Education; Inservice Teacher Education; Instructional Materials; Intervention; *Needs Assessment; *Program Development; Program Evaluation; Special Education Teachers
IDENTIFIERS	*Individualized Education Programs

ABSTRACT

A participant's manual for the training of special education teachers in the development of individualized educational plans (IEPs) for special needs students is presented. The materials are provided in the form of five modules which can be used together or independently. The objectives of each of the modules is that the participant will be able to identify and apply (1) the critical attributes of the Normalization Principle and the implications of that principle on the delivery of educational services to students with special needs, (2) instructional modifications and intervention strategies necessary for appropriate decision making for students during the prereferral phase of the IEP process, (3) procedures and components for the development of the IEP, (4) the components of the team decision making process necessary for developing the IEP, and (5) features required for the quarterly and annual review of an IEP. Each module contains both a pre- and posttest, and introductory section. (PHR)

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PARTICIPANT'S MANUAL

THE INDIVIDUALIZED EDUCATIONAL PLAN

A Decision-Making Process

IEP

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A Student-Centered Approach to Training

EC123574

The Massachusetts Department
of Education

FIELD TEST EDITION — July 1978
REVISED EDITION — April 1979
SECOND PRINTING — November 1979

CONNECTIONS PUBLICATIONS
52 Lee Street
Cambridge, MA 02139

Design by **Graphics Wise**

THE INDIVIDUALIZED EDUCATIONAL PLAN

A Decision-Making Process

IEP

A Student-Centered Approach to Training

Revised Edition
April, 1979

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The production of this document was supported by the NORTHEAST REGIONAL RESOURCE CENTER, 168 Bank Street, Hightstown, N.J. 08520, contract No. OEC 300-77-0537, awarded to the New Jersey State Department of Education from the United States Office of Education, Department of Health, Education and Welfare, Bureau of Education for the Handicapped. The opinions expressed herein, however, do not necessarily reflect the position or policy of the U.S. Office of Education, and no official endorsement by the U. S. Office of Education should be inferred.

ACKNOWLEDGEMENTS

We wish to thank the following persons for their contributions to the publication of these IEP Manuals:

Antonio Barbosa
Patti Bourexis
Susan Brideau
Anne Broder
Majorie Carr
Paul W. Celuzza
Ruth Connaughton
Eric H. Darling
Margaret Dennison
Lucille DiGravio
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Dorothy A. Pappas
Sandra Pierson
Theodore F. Riggen
David P. Riley
John Saunders
Anthony D. White
Cynthia Williams

The Revised Edition is based on the Field Test Edition prepared by the Individual Educational Plan Training Project, July, 1978.

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> **But always the surest guarantee of change and growth is the inclusion of living persons in every stage of an activity. Their lives, their experiences and their continuing response---even their resistances---infuse with life any plan which if living participants are excluded, lies on the drawing board and loses its reality.**
>
> **Margaret Mead**

INTRODUCTION

Federal and State legislation has mandated that an Individualized Educational Plan (IEP) be developed for all special needs students. The IEP is a vehicle and a blueprint for change for special needs students within the context of the educational community. For meaningful and longlasting changes to occur, all participants must be integrally involved in the decision-making process relative to developing the IEP.

The Individualized Educational Plan - a Decision-Making Process was developed by the IEP Training Project, a federally funded Statewide Special Education Project (January, 1978 - July, 1978). The materials were field tested in August, 1978 in cooperation with Boston School professionals. The revision of the IEP training materials was sponsored by the Massachusetts Department of Education, Division of Special Education and supported by a grant from the New Jersey Regional Resource Center.

The program contains five training modules that presents unique and important aspects of the IEP process. The modules allow school districts maximum flexibility in adapting the materials to meet their individual training needs. Therefore, the modules were designed so that they can be presented separately or in combination with each other.

The training materials represent thirty hours of training. The overview objectives followed by brief description of each module are indicated on the following pages.

OVERVIEW OBJECTIVES

In these modules, the participant will be able to identify and apply:

1. The critical attributes of the Normalization Principle and the implications of that principle on the delivery of educational services to students with special needs. (Module One)

2. Instructional modifications and intervention strategies necessary for appropriate decision-making for students during the Pre-Referral phase of the IEP process. (Module Two)

3. Procedures and components for the development of the IEP. (Module Three)

4. The components of the Team decision-making process necessary for developing the IEP. (Module Four)

5. Features required for the quarterly and annual review of an IEP. (Module Five)

TRAINING MODULES

Module One — The Individualized Educational Plan: Context and Implications

The purpose of this module is to present to special and regular educators an overview of the Principle of Normalization and the implications of that principle for delivery of educational services to students with special needs. Topics addressed in this module are: (1) the definition of the Normalization Principle; (2) Deviancy, Labeling, and Stigmata; (3) special educational services as a subsystem of a total system of service delivery; (4) legal precedents relative to Public Law 94-142 and Massachusetts Chapter 766; (5) components of Public Law 94-142 and Massachusetts Chapter 766 relative to the Individualized Educational Plan; (6) issues involved in due process; and (7) the concept of Least Restrictive Environment.

There are six training sections in Module One. It is estimated that it will take approximately three hours for the participants to complete the module. The materials should be presented in one three (3) hour session. The suggested breakdown for the presentation of the training materials is indicated below:

Session One	**Training Section**	**Minutes**
IEP - A Systems Orientation	I	25
Components of Public Law 94-142 and Mass. Chapter 766	II	30
Legal Precedents	III	25
Break		10

Educational Implications of Legal Precedents	IV	30
Deviancy, Labeling, and Stereotypes	V	30
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Module Two — The Pre-Referral Process: In-School Solutions

The purpose of this module is to introduce the special and regular educator to skills necessary for making appropriate decisions for students in the Pre-Referral Period. The Pre-Referral Period is specified in Paragraph 314.0 of the Chapter 766 regulations. These regulations state that prior to a referral of a school age child for an evaluation, all efforts are to be made to meet the child's needs within the context of services which are part of the regular education program.

There are eight training sections in Module Two. It is estimated that it will take six hours for the participants to complete the module. The materials should be presented in two (2) three hour sessions. The suggested breakdown for the presentation of the training materials is indicated below:

Session One	**Training Section**	**Minutes**
Why Pre-Referral	I	15
Learning Style	II	30
Break		10
Sociocultural Influences	III	15
School Systems	IV	70
Break		10
Recording Behavior	V	30
Session Two		
Informal Assessment	VI	20
Task Analysis	VII	60
Break		10
In School Solutions	VIII	90

Module Three — The Individualized Educational Plan: Components of the IEP

The purpose of this module is to introduce the special and regular educator to the necessary procedures and components for the development of an Individualized Educational Plan (IEP). An IEP is a working document that includes: (1) a student profile; (2) current performance levels; (3) general student centered goals; (4) specific student centered objectives; (5) teaching approaches and methodologies; (6) specialized equipment and materials; (7) monitoring and evaluation techniques, and (8) a special education service delivery plan. Also included is student information such as: age, language of the home, and the student and other services offered to the student, e.g. remedial reading. The IEP document is a product of the Evaluation Team's decisions concerning the student's needs.

There are eight training sections in this module. It is estimated that it will take the participant nine hours to complete the materials in this module. The materials should be presented in three, three hour sessions. The suggested breakdown for presentation is indicated below:

Session One	**Training Section**	**Minutes**
Overview of the IEP Components	I	40
Student Profile	II	70
Break		10
Current Levels of Performance	III	60
Session Two		
Establishing General Student Centered Goals	IV	60
Break		10
Teaching Approaches and Methodologies	V	60
Break		10
Monitoring and Evaluation Strategies	VI	40
Session Three		
Specific Student Centered Objectives	VII	90
Break		15
Types of Service Delivery	VIII	75

Module Four — The Individualized Educational Plan: A Team Approach

This module has been designed to introduce the special and regular educator to the decision-making process for the development of an Individualized Educational Plan (IEP). The organizational structure for developing the IEP is the Team approach. In this module, salient features of group decision-making processes are introduced *via* the use of case materials.

There are four training sections in this module. It is estimated that it will take nine hours to complete the training. The materials should be presented in three, three hour sessions. The suggested breakdown is indicated below:

Session One	**Training Section**	**Minutes**
Referral	I	80
Break		10
Assessment	II	90
Session Two		
Sharing Information	III	180
Session Three		
Developing an IEP	IV	180

Module Five — The Individualized Education Plan: Review and Revision

There are three training sections in this module. It is estimated that it will take three hours to complete the training. The materials should be presented in one, three (3) hour session. The suggested breakdown for the presentation of the training materials is indicated below:

Session One	**Training Section**	**Minutes**
An Overview of Review and Revision	I	20
Quarterly Review	II	60
Break		10
Annual Review	III	90

MODULE ONE

THE INDIVIDUALIZED EDUCATIONAL PLAN: CONTEXT AND IMPLICATIONS

PARTICIPANT'S MANUAL

INTRODUCTION TO MODULE ONE

In this module you will be introduced to the Principle of Normalization and the implications of that principle for the delivery of educational services to students with special needs. Through individual and group activities you will apply the information presented in Module One to educational processes involved in the formation of an Indivudalized Educational Plan (IEP). One of your activities involves the selection of a least restrictive educational environment for a student with severe special needs.

The purpose of this module is to introduce you to a theoretical basis as well as some legal precedents which encouraged the Federal mandate of "a free and appropriate public education" for all students.

OVERVIEW OBJECTIVES

After completing this module, the participant will be able:

1. To describe two concepts of systems theory:
   a. that all service delivery systems are part of a larger system
   b. that breakdowns in one subsystem cause a ripple effect in the others.
2. To list three (3) major components of P.L. 94-142.
3. To list three (3) major components of Chapter 766.
4. To cite the precedents of the PARC and Mills cases, and the implications of those cases for special education services.
5. To choose an appropriate and least restrictive environment for a student with special needs.
6. To identify the implications of labeling and stereotyping for students with special needs.
7. To identify critical attributes of the Normalization Principle.

CRITERION TEST — MODULE ONE

(30 pts) 1. Describe three components of a system.

(8 pts) 2. Number the following education placements from least restrictive (1) to most restrictive (8):

____ Itinerant teacher (tutor) in regular classroom

____ Resource room and regular class

____ Special day school

____ Regular classroom, special education materials, equipment

____ Special residential facility

____ Part-time regular classroom and special classroom

____ Regular classroom; materials, equipment, consulting services

____ Self-contained special classroom

(30 pts) 3. Describe in your own words what "normalization" means.

(10 pts) 4. Mark True or False
(2 pts each)

1. ____ The names of all participants on an Evaluation Team need not be recorded.

2. ____ Bi-lingual parents must be informed, in their primary language, of their child's educational status.

3. ____ A student may be denied special services because the school system does not have the appropriate services available.

4. ____ Criteria for a student's movement from the recommended educational environment to a less restrictive one must be stated on the IEP.

5. ____ Parents can reject an academic placement recommended by the Evaluation Team after an education plan has been written.

(15 pts) 5. List at least 3 major stages needed to implement an Individualized Educational Plan according to Chapter 766 (5 pts each)

(0 pts) 6. Define at least six of the following:

- L.D. -
- E.M.R. -
- T.M.R. -
- E.D. -
- 766 Child -
- autistic -
- B.D. -
- M.B.D. -
- S&P -
- M.R. -
- C.P. -

(7 pts) 7. Johnny is M.R. What does that statement tell you about Johnny?

THE INDIVIDUALIZED EDUCATIONAL PLAN: CONTEXT AND IMPLICATIONS
BACKGROUND INFORMATION

By Christine L. Shane

Introduction

The Individualized Educational Plan (IEP) is not an end in itself; rather, it is a culmination of astute and conscientious decision-making on the part of educators, administrators, and parents for the purpose of providing responsive and appropriate educational environments for students with special needs. Underlying the IEP decision-making process is the mandate that all students are entitled to a "free and appropriate" public education, regardless of their degree of handicap (Public Law 94-142). The mandate for a "free and appropriate" public education was largely due to the activities of advocates who recognized the social, legal, economic and educational inequities which were creating virtually insurmountable hurdles for handicapped individuals. As in the civil rights movement for Black Americans, redress was sought through the courts (e.g. Pennsylvania Association for Retarded Children vs. The Commonwealth of Pennsylvania, 1971 and Mills vs. Board of Education, District of Columbia, 1972), through legislation (e.g. the establishment of Developmental Disabilities Councils and Mental Health/Mental Retardation Bureaus), and through painful examinations of society's inhumane treatment of institutionalized, handicapped individuals.[1]

As a result of the advocacy movement, significant realities have begun to emerge: 1) equal rights for handicapped citizens can be mandated through law, 2) negative social attitudes towards handicapped citizens must be eliminated in order to sustain those rights, and 3) services for handicapped citizens must be constantly examined and improved in order to eliminate negative attitudes and stereotypes.

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[1] Blatt and Kaplan, Christmas in Purgatory, 1966 and Kugel and Wolfensberger in Changing Patterns in Residential Services for the Mentally Retarded, 1969.

The following represents theoretical, legal, and service delivery issues which are directly related to the education of students with special needs.

* * * *

The IEP — A Systems Orientation

The concept of education as a service delivery system for students with special needs is crucial if educators are to understand the intricacies of special services in general. The significant features of a systems orientation to special education services are: 1) no system functions in isolation; 2) each system component depends upon, and is affected by the management of other components; and 3) an individual who is receiving services from one agency may be involved with another agency within that system. Special educational services illustrate these points.

The formalized structure which is usually responsible for the management of fiscal resources and the provision of administrative services and activities for the special classroom, is the regular education service. Therefore, the quality of education for a special needs student is not dependent upon one system, but upon TWO systems: 1) special, and 2) regular education. The situation becomes more complex if a special needs student is involved with a residential placement outside of the home. For example, if a special needs student is multi-handicapped, it is not unusual for that student to be residing in a group home contracted through the Department of Mental Health, attending a special classroom sponsored by an education collaborative, and attending a neighborhood public school. S/he may also be receiving health services through a local physician, therapist, or neighborhood health center, attending recreational programs sponsored by quasi-public agencies such as United Cerebral Palsy, and be under the supervision of a guardian or advocate appointed by the legal system (court) or a State institution. Indeed, systems of service delivery become intertwined, interfaced, and may consume the life of an individual requiring such services.

The Individualized Educational Plan is a process which is intended to insure quality education for students with special needs. The structure of the system, (what is the system composed of?), the function of the system, (what does the structure do?) and the evaluation of the system (are the structures and functions doing their job well?)[2] are all important characteristics of a service delivery system which is reflected in the IEP.

* * * *

Legal Precedents and Implementation of Special Educational Services

Although there are many lawsuits on behalf of handicapped individuals,[3] the two most outstanding are: The Pennsylvania Association for Retarded Citizens (PARC) vs. Commonwealth of Pennsylvania, 1971, and Mills vs. District of Columbia (1972). The outcomes of these decisions have had a profound effect on the quality of educational services provided for handicapped students. The PARC suit was brought before the court to obtain the right of mentally retarded children previously excluded from public education services, to be given a free public education, appropriate to their individual learning abilities. Based on expert testimony, the court rendered the decision that:

1. Every child can benefit from an appropriate public education regardless of their degree of handicap,
2. Placement in a special class within a regular school is preferable to placement in a segregated (institutional) setting and,
3. no child shall be labeled mentally retarded or have his/her educational status changed without the benefits of an impartial hearing (due process).

The Mills suit (1972) expanded the outcomes of the PARC decision by including: 1) all handicapped children, 2) reaffirming due process procedures, and 3) stating that all available funds for education be equally distributed among all children, including those with special needs.

The effects of these court decisions on educational processes are reflected in the concepts of Least Restrictive Alternative (to the greatest extent possible handicapped children must be educated with non-handicapped children in non-segregated settings) and Due Process (fair hearing prior to placements in specialized programs).

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[2] Tracy, Michael, Gibbons, Spencer, Kladder, Fred and Daggy, Niles, Case Conference: a Simulation and Source Book, University of Michigan Press, 1974.

[3] Basic Rights of the Mentally Handicapped, Mental Health Law Project, Washington, D.C. 197

The educational community responded to the dictums of the courts in two ways: 1) Providing students with special needs a continuum of education placements (alternatives) within the educational community, (e.g. Deno's Cascade Model of Special Educational Placement, 1972), and 2) Moving specialized instructional systems and specialized educational staff toward regular (mainstream) classroom settings (e.g. Reynolds, "The Changing Cascade", 1976). Both models suggested that broadening the skills of all teachers, expanding curricula, and types of educational options for students with special needs, will enhance the quality of education for all students within public schools.

* * * *

Deviancy: In the Eye of the Beholder?

Deviancy is personal; it is contained in one's perception of what is typical. Deviancy is familial; it is determined by one's own experiences and immediate surroundings. Deviancy is societal; each society has its own values, attitudes, and tolerances of its members' actions, attitudes and beliefs. Deviancy is not timeless. Although each society has its perceptions of deviancy, those perceptions change from one generation to another. For example, in the 1900's, many minority members could neither vote nor hold political office. In 1979, minority persons hold political offices and attempt to heighten individual awareness of the societal inequities and political policies which have consciously or unconsciously devalued minority persons throughout the past centuries.

Deviancy is negatively valued. Very often, persons can be different--wear clothing that is unique, live unusual lifestyles, or belong to religious cults which make specific demands upon its members; but those differences are generally accepted as falling within the boundaries of accepted societal limits (mainstream). However, if an individual expresses a difference that is negatively valued, such as aberrant behaviors, criminal actions, intellectual impairment, etc., the difference is categorized as a deviancy.

Wolfensberger (1972) states in Normalization, pages 15-16:

> When a person is perceived as deviant, he is cast into a role that carries with it powerful expectancies. Strangely enough, these expectancies not only take hold of the mind of the perceiver, but of the perceived person as well. It is a well-established fact that a person's behavior tends to be profoundly affected by the role expectations that are placed upon him/her. Generally, people will play the roles they have been assigned. This permits those who define social roles to make self-fulfilling prophecies by predicting that someone cast into a certain role will emit behavior consistent with that role.

The concept of deviancy as it relates to education is changing. In 1950, it was not considered feasible to educate a moderately/severely retarded student in the public schools. In 1979, not only is it possible to educate students who are labeled moderately/severely mentally retarded in the public schools, but it is also mandated by law that all students who have special needs, regardless of the severity of their handicap, be educated at the public's expense. Although society has legislated that children who are labeled mentally retarded have the right to be educated in the same setting as typical children, society does not have the ability to legislate against the stereotypes and negative damaging attitudes that have prevailed towards handicapped persons. By confronting and examining such negative attitudes, educators may better assess the dynamics of education within the classroom. Is a student who is labeled "retarded" actually unable to cope in an integrated setting, or have the societal attitudes towards handicapped individuals limited their possibilities for success?

* * * *

Ideological Considerations: The Principle of Normalization

The prejudices and environmental conditions thrust upon mentally retarded citizens were challenged by N.E. Bank-Mikkelsen, head of the Danish Mental Retardation Services in the 1950's. Bank-Mikkelsen noted the disparity between the environmental surroundings of institutionalized mentally retarded persons and other persons. He noted the dearth of educational and social opportunities, and the lack of dignity which mentally retarded persons were accorded. Bank-Mikkelsen began advocating for mentally retarded persons to receive the same living conditions and social opportunities as other persons.

This position was further advocated by Bengt Nirje, then Secretary General of the Swedish Association for Retarded Children. He formally phrased the concept of a more normalized environment for retarded citizens by "making available to the mentally subnormal patterns and conditions of everyday life which are as close as possible to the norms and patterns of the mainstream of society"[1]

In 1972, Wolf Wolfensberger paired the Scandinavian concept of normal living conditions with the social concept of deviancy, and suggested that human services could be improved if human service providers would base their service goals and objectives on the Principle of Normalization. The following information attempts to relate the Principle of Normalization, as advocated by Wolfensberger, 1972, to issues relevant to special education today.

* * * *

The Principle of Normalization suggests that the focus of human service agencies for handicapped individuals be three dimensional. Those dimensions are:

1) the individual;
2) the individual's environment; and
3) societal and cultural attitudes toward the individual.

First, programmatic goals and objectives for handicapped individuals should be as typical as possible. Consequently, persons who deliver services to handicapped individuals (teachers, aides, residence managers, therapists, administrators, etc.) should expect handicapped individuals to behave as typically as possible, and to achieve as much as possible. Underlying this rationale is the belief that persons behave in patterns expected of them. If the expectations are minimal and not challenging, then the outcome will probably be the same. On the other hand, if expectations for a client are as typical as possible, the behaviors elicited by those expectations should meet the expressed criteria. To heighten expectations alone will not guarantee improvement of the abilities of handicapped persons. Concurrently, "technological know-how" must improve. It is not a new concept that inability to teach handicapped individuals to successfully enter the mainstream of society lies not with the handicapped individual, but with society's inability to teach that individual.

---

[1] Way to Go, Baltimore, University Park Press, 1978

Early pioneers in the field of mental retardation, such as Edward Seguin and Jean-Marc Gespard Itard, demonstrated that educational technology could improve the ability of persons labeled mentally deficient. Recent innovative technologies have demonstrated that profoundly handicapped persons, previously considered to require custodial care, can perform complex vocational tasks (Gold, 1976) and can become to some degree, self-supporting. It seems obvious that the innate abilities of mentally retarded and profoundly handicapped persons have not changed, but societal boundaries surrounding those abilities have been redefined.

Second, agencies should conduct programs in environments which are as similar as possible to those commonly found in society. For example, an educational setting or a residence for handicapped persons should convey the same ambience (feeling) as a school or residence for nonhandicapped persons. If handicapped persons are seen in environments that are similar to our own, then they will be perceived to be more like ourselves.

Because handicapping conditions are generally devalued (persons in our society do not value mental retardation, emotional disturbance, physical handicaps), human service providers should strive to enhance the quality of the settings in which handicapped persons are seen. Thus, societal judgments of 'handicappism' will not be further compounded by 'negative signals' elicited from the environment.

It is not uncommon for an individual to make assumptions about another based upon nonverbal messages or cues from the environment. For example, an observer can judge rather accurately the social status of an individual by the affluence and comfort of his or her surroundings, by the quality and appropriateness of his or her appearance, and by the quality of the interaction between that person and his or her peers and associates. The more positive these observations are, the more favorable the judgement concerning the individual.

Third, Normalization suggests that human services can change negative social attitudes toward the handicapped by representing these people in a positive manner, and by providing services which are based upon high social standards. Those standards include ethical and fiscal accountability, innovation and efficiency in management, and planning procedures to ensure the appropriateness and availability of services. Improving the quality and reputation of a service system will enhance the image of its clients. One only has to look at the automobile business for an example. If the product of an auto manufacturer is not selling well, a typical business strategy is to launch a campaign extolling the high quality of the automobile as well as the efficiency and high manufacturing standards of the company. Unfortunately, the poor reputation of human service facilities (e.g. state institutions), and programs (e.g. Welfare Funding) and related scandals, have publicized their clients' abilities and potentials in an opposite fashion. Human services could also look to business as an example. If the goal of a human service system is for its clients to become as typical as possible, then those services themselves must also become as socially normative as possible.

From these dimensions of Normalization emanates one of the most significant and far-reaching mandates for human services - integration of devalued persons into the mainstream of society.

Integration

The cornerstone of the Principle of Normalization as described by Wolfensberger (1972) is the integration of special needs individuals into existing service systems rather than creating substantially separate systems designed specifically for a handicapped or devalued population. If the goal of a human service for handicapped individuals is to enable its clients to become socially adapted, then the service provider should realize that social integration is a pre-condition to social adaptation. Otherwise, the client's adaptation will become dependent upon an artificial (segregated) society. In other words, for a handicapped individual to be perceived as a valued individual, and to behave as typically as possible, the environment from which s/he derives life skills and self-perceptions must be as typical as possible.

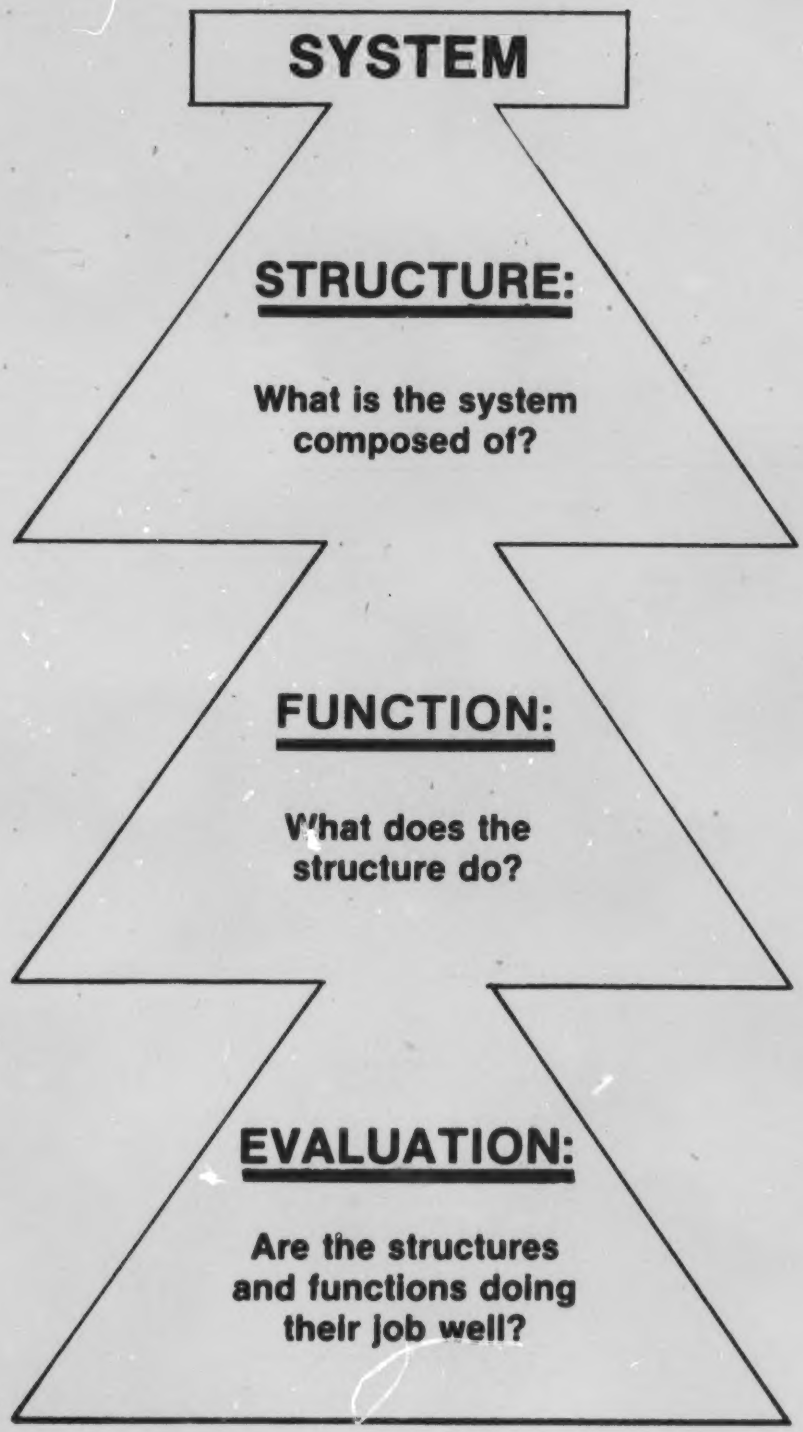
In order to achieve the maximum social adaptation of devalued individuals, integration must be both physical and social. Physical integration refers to the location, accessibility, and the image of the service building. Specifically, a service should be located near population centers, be easily accessible by car or public transportation and its physical appearance should be as typical as possible. Unfortunately, many schools, residences, and institutions for devalued persons look like penal institutions or worse. Social integration refers to the quality and the quantity of time an individual with special needs spends interacting with typical citizens. The implication is that merely encouraging a special needs individual to use public facilities, e.g. schools, playgrounds and recreation centers, is not effective integration. The individual must have meaningful interaction with nonhandicapped peers. Integrative opportunities should not be sporadic; they must be consistently encouraged and sustained at all times.

DEFINITION OF A SYSTEM

"The sum total of parts working independently and working together to achieve required outcomes based on needs."

Kaufman, 1972

1.2



SYSTEM

STRUCTURE:

What is the system composed of?

FUNCTION:

What does the structure do?

EVALUATION:

Are the structures and functions doing their job well?

INDIVIDUALIZED EDUCATIONAL PLAN SYSTEMS OVERVIEW

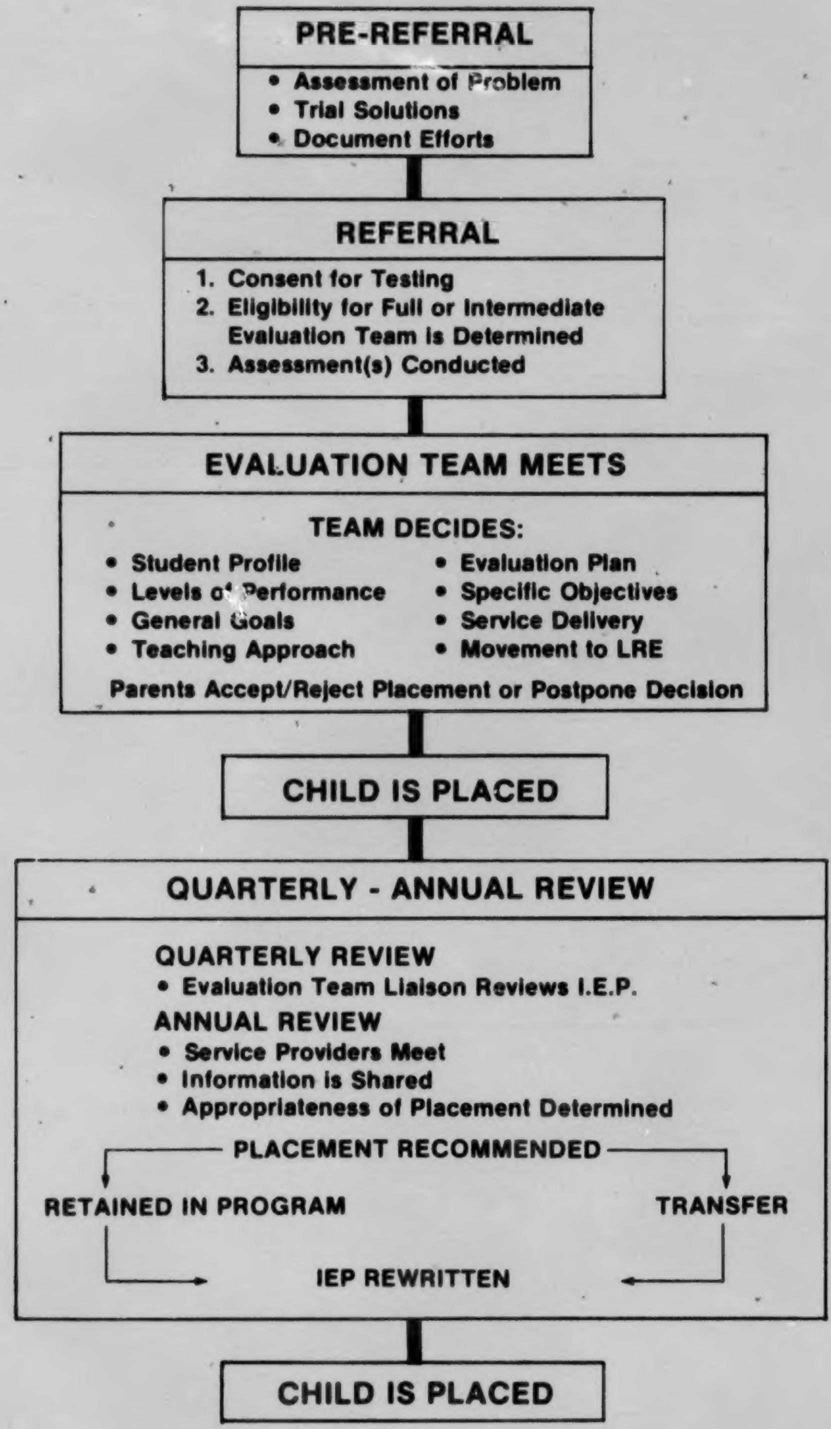
STRUCTURE	FUNCTION	EVALUATION
PRE-REFERRAL	TO IDENTIFY STUDENTS IN NEED OF EDUCATIONAL INTERVENTION	ASSESSMENT OF STUDENT'S LEARNING ABILITY IN THE REGULAR CLASSROOM ASSESSMENT OF TEACHING STRATEGIES IMPLEMENTED IN THE REGULAR CLASSROOM
REFERRAL	TO DETERMINE ELIGIBILITY OF THE STUDENT FOR SPECIAL SERVICES	PARENT INFORMATION AND CONSENT APPROVAL BY SCHOOL ADMINISTRATORS (PRINCIPAL)
EVALUATION TEAM MEETING	TO DETERMINE AN APPROPRIATE AND LEAST RESTRICTIVE INDIVIDUAL EDUCATIONAL PLAN	PLANS WRITTEN IN OBJECTIFIED MEASURABLE, BEHAVIORAL TERMS
QUARTERLY AND ANNUAL REVIEWS	TO DETERMINE THE EFFECTIVENESS AND APPROPRIATENESS OF THE I.E.P. TO CHANGE, MODIFY, OR DISCONTINUE	EVALUATION TEAM APPROVAL ADMINISTRATIVE APPROVAL PARENT CONSENT

1.4

GOAL OF THE INDIVIDUALIZED EDUCATIONAL PLAN

TO PROVIDE AN EDUCATIONAL ENVIRONMENT WHICH REFLECTS THE STUDENT'S NEEDS IN LIEU OF CHANGING THE STUDENT TO REFLECT THE EDUCATIONAL ENVIRONMENT.

MASSACHUSETTS LAW
CHAPTER 766



PRE-REFERRAL

- Assessment of Problem
- Trial Solutions
- Document Efforts

REFERRAL

1. Consent for Testing
2. Eligibility for Full or Intermediate Evaluation Team is Determined
3. Assessment(s) Conducted

EVALUATION TEAM MEETS

TEAM DECIDES:

- Student Profile
- Levels of Performance
- General Goals
- Teaching Approach
- Evaluation Plan
- Specific Objectives
- Service Delivery
- Movement to LRE

Parents Accept/Reject Placement or Postpone Decision

CHILD IS PLACED

QUARTERLY - ANNUAL REVIEW

QUARTERLY REVIEW

- Evaluation Team Liaison Reviews I.E.P.

ANNUAL REVIEW

- Service Providers Meet
- Information is Shared
- Appropriateness of Placement Determined

PLACEMENT RECOMMENDED

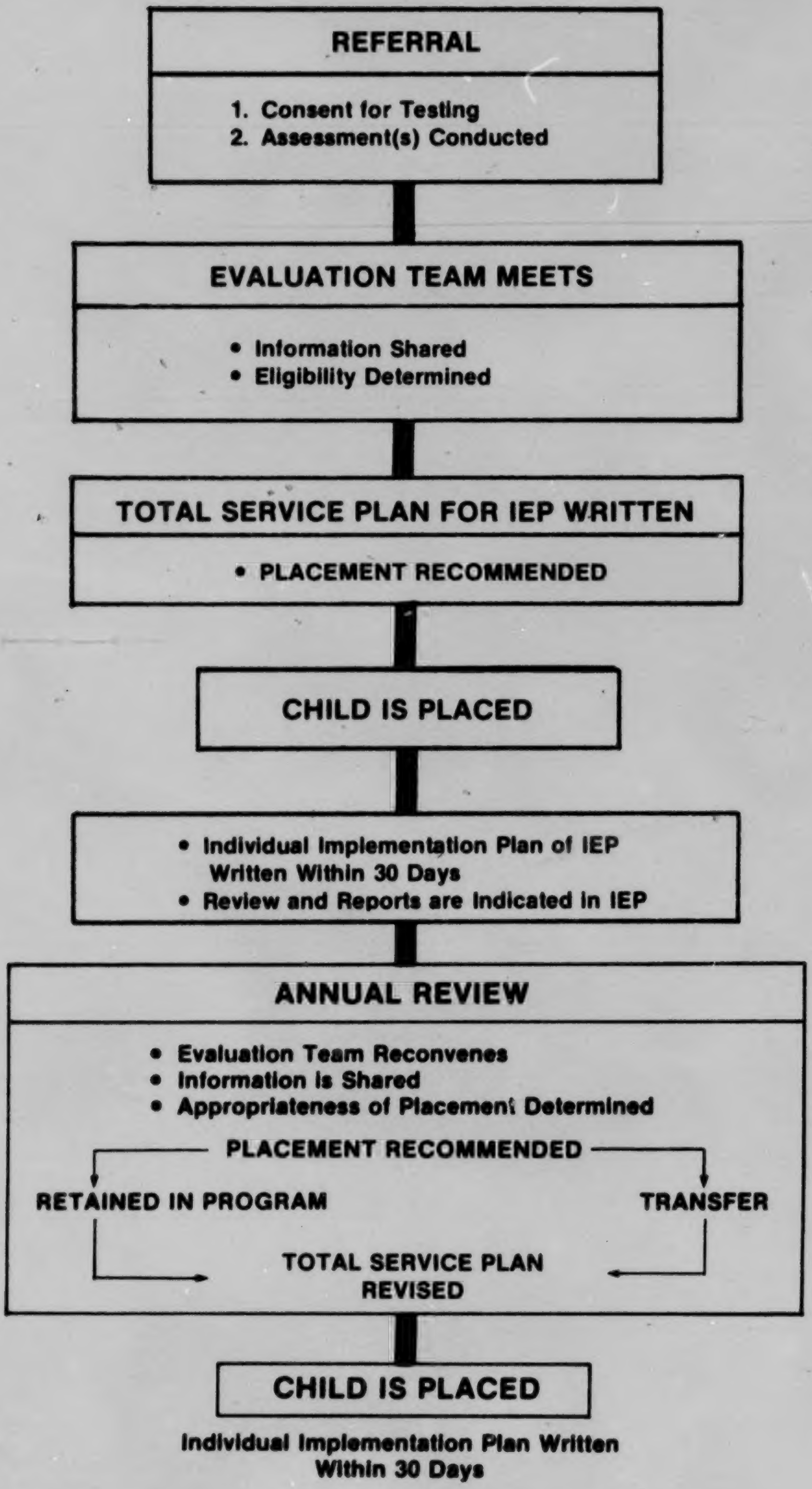
RETAINED IN PROGRAM

TRANSFER

IEP REWRITTEN

CHILD IS PLACED

FEDERAL LAW
PUBLIC LAW 94-142



REFERRAL

1. Consent for Testing
2. Assessment(s) Conducted

EVALUATION TEAM MEETS

- Information Shared
- Eligibility Determined

TOTAL SERVICE PLAN FOR IEP WRITTEN

- PLACEMENT RECOMMENDED

CHILD IS PLACED

- Individual Implementation Plan of IEP Written Within 30 Days
- Review and Reports are Indicated in IEP

ANNUAL REVIEW

- Evaluation Team Reconvenes
- Information is Shared
- Appropriateness of Placement Determined

PLACEMENT RECOMMENDED

RETAINED IN PROGRAM

TRANSFER

TOTAL SERVICE PLAN REVISED

CHILD IS PLACED

Individual Implementation Plan Written Within 30 Days

MAJOR DIFFERENCES BETWEEN

MASSACHUSETTS CHAPTER 766	FEDERAL PUBLIC LAW 94-142
PRE-REFERRAL	NO PRE-REFERRAL
REFERRAL	REFERRAL
ONE PLAN IS WRITTEN	TWO PLANS ARE WRITTEN
	1. TOTAL SERVICE PLAN DEVELOPED
CHILD IS PLACED	A. LONG RANGE GOALS STATED B. CHILD IS PLACED
QUARTERLY REVIEW	2. INDIVIDUAL IMPLEMENTATION PLAN A. SHORT-TERM INSTRUCTIONAL OBJECTIVES ARE WRITTEN
ANNUAL REVIEW	ANNUAL REVIEW REQUIRED

PENNSYLVANIA ASSOCIATION FOR RETARDED CHILDREN
vs.
COMMONWEALTH OF PENNSYLVANIA
(PARC, 1971)

I. Mentally Retarded Children to be given

A. Access to free public education

1. Appropriate to individual learning abilities, ages 6 - 21

II. Due Process

A. No child shall be labeled mentally retarded or have his/her educational status changed without:

1. notice to parents
2. representation by legal counsel
3. formal hearing
4. right to examine child's record
5. presentation of evidence
6. cross examination of witnesses
7. independent evaluation/assessment of the folowing aspects:
    a. medical
    b. psychological
    c. educational
8. right to a record of the hearing (Hearing record)
9. decisions on records

B. Every child can benefit from an appropriate public education regardless of the severity of handicaps (Expert testimony)

1. placement in regular classrooms is preferable to placement in special classes
2. placement in a special class within the regular school is preferable to placement in a segregated setting, i.e. special schools, residential programs, etc.

MILLS vs. BOARD OF EDUCATION - DISTRICT OF COLUMBIA

Judge Joseph C. Waddy, presiding
(Mills, 1972)

I. Expands PARC to all handicapped children

Plaintiffs: Children who have been excluded due to alleged mental, physical, behavioral, or emotional handicaps.

II. Re-affirm Due Process

1. hearing prior to exclusion
2. termination of program
3. classification into special programs

III. All available funds for education be equally distributed to all children, including those with special needs.

DUE PROCESS

AN INDIVIDUAL HAS THE RIGHT TO:

FAIR NOTICE:

Information concerning the nature of the procedures, e.g.
. . . right of attorney
. . . right to read records
. . . right to cross examine
. . . right to present witnesses

FAIR HEARING:

Prior to individual rights being abridged.

FAIR AND IMPARTIAL TRIBUNAL:

The deciding body must be able to render an unbiased decision.

ACTIVITY ONE: DUE PROCESS

The following statements reflect common procedural questions relative to the development of an I.E.P.

Please answer the following questions with TRUE or FALSE

____ 1. A parental request for an independent evaluation of a special needs child may be denied.

____ 2. A completed I.E.P. may be handwritten if legible.

____ 3. The transportation sections of a completed I.E.P. may be left blank.

____ 4. Bi-lingual parents must be informed, in their primary language, of their child's education status.

____ 5. Testing and assessment of a child referred for special services, can be done prior to receiving parental consent

____ 6. Parents can reject an academic placement recommended by the evaluation team after an education plan has been written

____ 7. A classroom teacher may refuse entrance of a special needs student into his/her classroom.

____ 8. A student may be denied special services because the school system does not have the appropriate services available.

____ 9. The names of all the participants on an evaluation team need not be recorded.

____10. Criteria for a student's movement from the recommended educational environment to a less restrictive one must be stated on an I.E.P.

1.11

LEAST RESTRICTIVE ENVIRONMENT

TO THE GREATEST EXTENT POSSIBLE:

- HANDICAPPED CHILDREN MUST BE EDUCATED WITH NON-HANDICAPPED CHILDREN IN A NON-SEGREGATED SETTING.

- CONTINUUM OF ALTERNATIVE PLACEMENTS MUST BE AVAILABLE TO MEET THE EDUCATION REQUIREMENTS OF THE CHILD.

- ANNUAL REVIEW OF SPECIAL PLACEMENTS IS REQUIRED.

- PLACEMENTS MUST BE MADE ON AN INDIVIDUAL BASIS.

LEAST RESTRICTIVE ENVIRONMENT

GOALS:

MAXIMUM INDIVIDUALIZATION:

IN ORDER TO FIT THE SETTING TO THE CHILD, NOT THE CHILD TO THE SETTING.

MAXIMUM INTEGRATION:

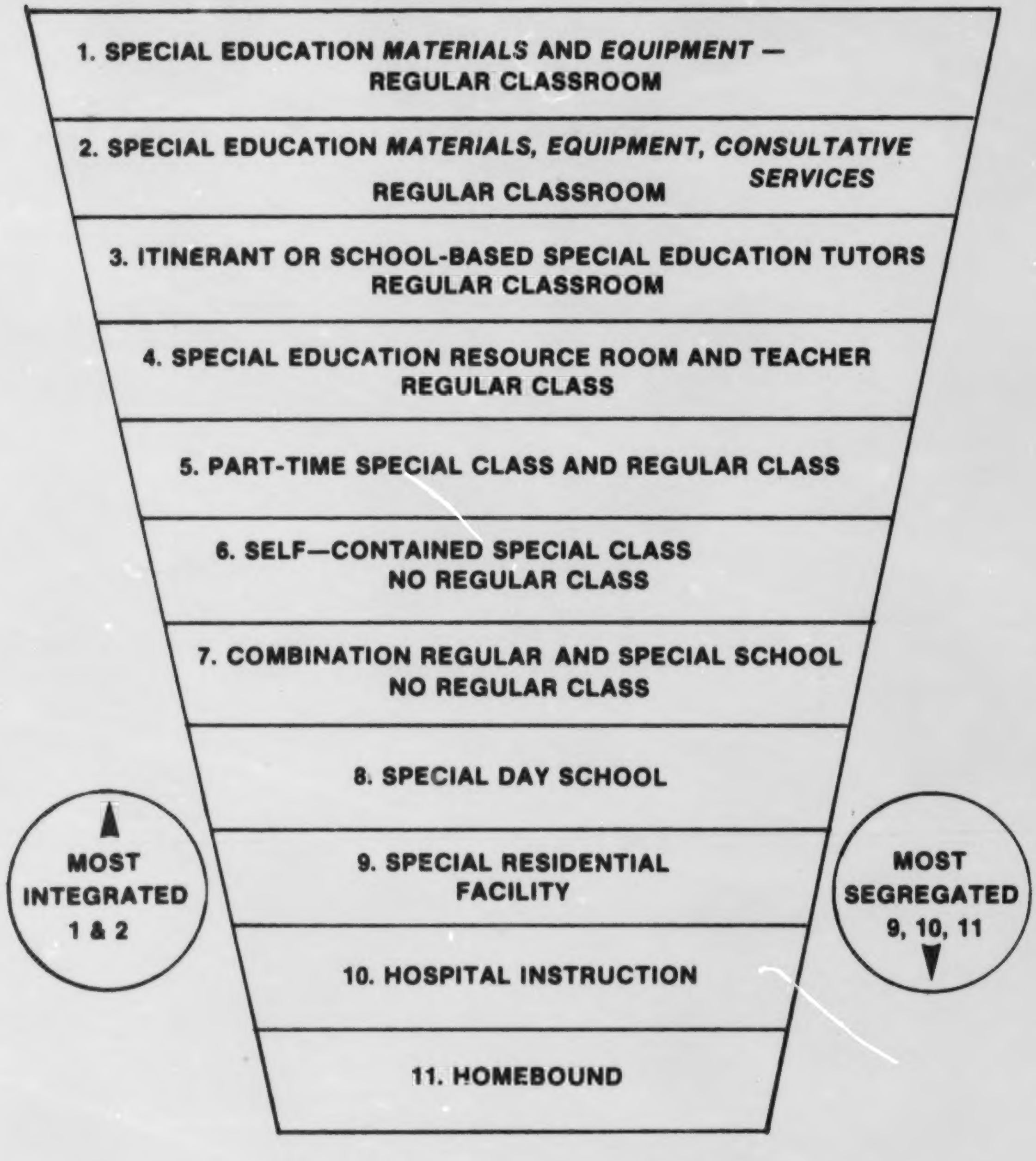
OF CHILDREN WITH SPECIAL NEEDS WITH TYPICAL CHILDREN, IN AS NORMAL A SETTING AS POSSIBLE.

MAXIMUM MOVEMENT:

OF CHILDREN WITH SPECIAL NEEDS FROM MORE RESTRICTIVE ALTERNATIVES TO LESS RESTRICTIVE ALTERNATIVES.

1.13

DENO'S CASCADE MODEL OF SPECIAL EDUCATION SERVICES (1972)



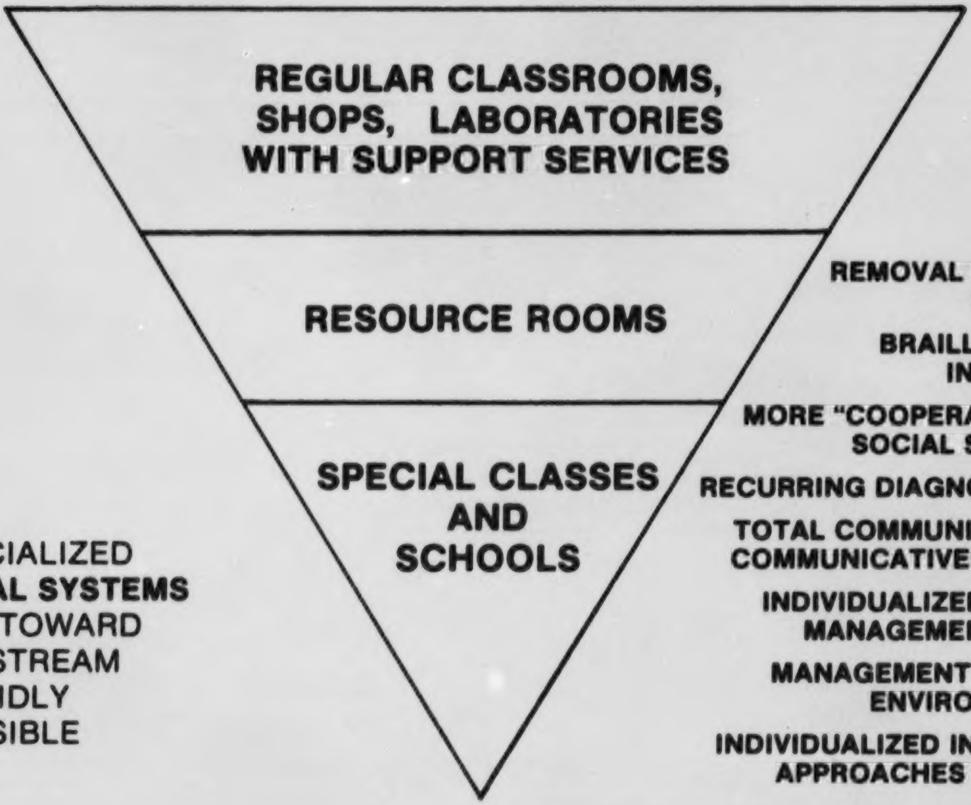
1. SPECIAL EDUCATION *MATERIALS* AND *EQUIPMENT* — REGULAR CLASSROOM
2. SPECIAL EDUCATION *MATERIALS, EQUIPMENT, CONSULTATIVE SERVICES* REGULAR CLASSROOM
3. ITINERANT OR SCHOOL-BASED SPECIAL EDUCATION TUTORS REGULAR CLASSROOM
4. SPECIAL EDUCATION RESOURCE ROOM AND TEACHER REGULAR CLASS
5. PART-TIME SPECIAL CLASS AND REGULAR CLASS
6. SELF—CONTAINED SPECIAL CLASS NO REGULAR CLASS
7. COMBINATION REGULAR AND SPECIAL SCHOOL NO REGULAR CLASS
8. SPECIAL DAY SCHOOL
9. SPECIAL RESIDENTIAL FACILITY
10. HOSPITAL INSTRUCTION
11. HOMEBOUND

▲ MOST INTEGRATED 1 & 2

MOST SEGREGATED 9, 10, 11 ▼

NORMALIZATION PLACEMENT PRINCIPLE:
MOVE PUPIL DOWN ONLY AS FAR AS NECESSARY
MOVE UP AS SOON AS POSSIBLE

THE CHANGING CASCADE*



REGULAR CLASSROOMS, SHOPS, LABORATORIES WITH SUPPORT SERVICES

RESOURCE ROOMS

SPECIAL CLASSES AND SCHOOLS

REMOVAL OF ARCHITECTURAL BARRIERS

BRAILLE AND MOBILITY INSTRUCTION

MORE "COOPERATIVE" CLASSROOM SOCIAL STRUCTURE

RECURRING DIAGNOSTIC ASSESSMENT

TOTAL COMMUNICATION FOR THE COMMUNICATIVELY HANDICAPPED

INDIVIDUALIZED CONTIGENCY MANAGEMENT SYSTEMS

MANAGEMENT OF ACOUSTIC ENVIRONMENT

INDIVIDUALIZED INSTRUCTION TEAM APPROACHES TO PLANNING

MOVE SPECIALIZED
INSTRUCTIONAL SYSTEMS
AND **STAFF** TOWARD
THE MAINSTREAM
AS RAPIDLY
AS POSSIBLE

FEWER SEGREGATED PLACEMENTS, MORE DIVERSIFIED INTEGRATED PLACEMENTS

* ADAPTED FROM REYNOLDS, 1976

ACTIVITY TWO: THE CASE OF JEAN

Overview Objectives

1. To be able to choose an appropriate and least restrictive environment for a student with special needs.
2. To be able to describe two concepts of systems theory.
    a. that all service systems are part of a larger system.
    b. that breakdowns in one sub-system cause a ripple effect in the others.

ACTIVITY

Each participant will read the case study of Jean on pages 29-36 and individually decide upon the most appropriate and least restrictive educational environment for this student. Each participant will record his/her decision and answer the questions contained in the Participant's Manual.

DIRECTIONS

Carefully read the case study of Jean contained in this manual on pages 29-36. Given the information from the case study, answer the following questions:

1. What is the least restrictive and most appropriate educational placement?
2. Should the public schools provide an Individualized Educational Plan (IEP) that encompasses a residential component?
3. Are other human services agencies (Department of Mental Health/Mental Retardation, Department of Child Welfare, etc.) responsible for the provision of a residential component?
4. Who, if necessary (parent, State services, private agency) shall provide coordination of educational and residential services?
5. What educational problems (compromises) emanate from this case?

MASSACHUSETTS DEPARTMENT OF EDUCATION

DIVISION OF SPECIAL EDUCATION

BUREAU OF SPECIAL EDUCATION APPEALS

IN RE: JEAN D. CASE #0000

DECISION

I. PRELIMINARY STATEMENT

This decision is written pursuant to the requirements of M.G.L.., c. 71B, c. 30A and accompanying sections, the regulations issued by the Department of Education et al. pursuant to the enabling provisions of M.G.L.., c. 71B, and the Acts of 1972.

A hearing was held by the Bureau of Special Education Appeals on 9-28-77 at the Greater Boston Regional Center, Cambridge, on appeal by Mr. and Mrs. J.D. of the Educational Plan proposed by the Boston Public Schools for the period from 4-77 to 4-78, for their daughter Jean. Such appeal resulted from the following c. 766 procedure: (1) Dr. Morris, Chief Psychologist at the Developmental Disabilities Unit of the Rockport Mental Health Center, requested an updated full Evaluation on 3-16-77; (2) Evaluation Team meeting was held on 4-5-77; (3) Educational Plan was proposed in mid-May, 1977; and (4) Parents rejected the plan on 5-23-77.

Parties present were:

Mr. and Mrs. J.D., Parents
Advocate and Chief Psychologist, Rockport Developmental Disabilities Unit
Director of Developmental Disabilities Unit, Adult Residential Program, Boston State Hospital
Appeals Office, Boston Public Schools
766 Coordinator, Community District VII
Evaluation Team Chairperson
Coordinator of Development Day Care Program, Washington School
Observer, Massachusetts Advocacy Center
Observer, BSEA
Hearing Officer

II. PROFILE

Jean is an 18-year-old profoundly retarded student who is presently functioning within a nine to eighteen month level. As a result of Cerebral Palsy, she is a severe quadriplegic and confined to a wheelchair. Following a quiescent period of seven years, she experienced a grand mal seizure on 9-15-77, and was hospitalized at the Braddak Hospital at the date of the hearing. Jean had spinal fusion surgery on 6-12-75 to correct curvature of the spine and wears a chest to hip vest. She has no expressive language and virtually no self-help skills, rendering her totally dependent.

Jean had no educational involvement up to the age of thirteen. She entered the Holy Name Day Care Center, a Department of Mental Health facility, in 9-73 and remained through 6-75. For the past two years, she was enrolled in the Boston Public Schools - Brown School during 1975-76, and the Developmental Day Care Program at the Washington School during 1976-77.

Since 2-15-77, Jean has been a resident at the Adult Residential Program, Developmental Disabilities Unit, State Hospital.

III. SUMMARY OF EVIDENCE

Documentary evidence included Exhibits A-1 to A-10, submitted by the parents and Exhibits B-1 to B-9, submitted by the Boston Public Schools. In addition, testimonial evidence included about three hours of tape recordings.

A. HISTORICAL BACKGROUND

According to the Admission Note of State Hospital (Exh B-5) Jean was admitted as an emergency residential placement on 2-25-77 on the order of the Commissioner of the Department of Mental Health. Her placement was necessitated by the most recent psychiatric break-down of her mother, and the inability of her father to continue to care for her following a coronary attack in 1976.

The mother's private psychiatrist, indicated in his report of 9-27-77 (Exh A-8) that Mrs. D. has a manic depressive illness with both manic and depressive episodes. As the mother's therapist since 1963, he stated: "For a long time, I have had the feeling that the family's insistence on caring for Jean in the home was somewhat unrealistic and was contributing to my patient's mental breakdowns. However, the last two hospitalizations of Mrs. D. made it very clear indeed that she was not emotionally able to cope with the responsibilities of caring for Jean anymore. It was with my support that the husband arranged for Jean's temporary placement outside the home. This was a very difficult decision for the family, considering the many years that they have invested in the care of Jean.

Following Jean's placement at State Hospital, Mr. Morris, Chief Psychologist at the Developmental Disabilities Unit of the University Mental Health Center (family's Catchment Area for the Department of Mental Health), explored a more suitable permanent arrangement. According to his testimony and his letters of 4-7-77 (Exh A-4) and 8-18-77 (Exh A-5), Dr. Morris investigated the following areas of direct service: 1. State Schools were no longer accepting new applications in accordance with the de-institutionalization policy of the Department of Mental Health; 2. Pediatric nursing homes had waiting periods ranging from six months to a year, and usually do not accept children over the age of sixteen; 3. Homemaker services were unavailable; 4. Foster home care was impossible since the parents were unwilling to surrender temporary custody to the Department of Public Welfare; and 5. Out-of-state placement was unacceptable since the parents insisted on remaining within commuting distance of any residential placement.

During the 1976-77 school year, Jean attended the Developmental Disabilities Day Care Program at the Washington School, a Boston Public School, in a 502.5 prototype. Since this program is attended wholly by children with developmental disabilities who spend 100 per cent of their time within the class, the Department of Education has permitted Boston to designate such a placement as a 502.5 prototype.

There was no dispute that Jean had made educational gains in the Washington Program despite irregular attendance resulting from transportation problems and intermittent physical and occupational therapy services. Mr. Morris requested that the full evaluation be updated on 3-16-77 largely because of the total unsuitability of Jean's temporary placement at the State Hospital. According to his continuing discussions with Bonnie Farrell, Director of Developmental Disabilities Unit at the Residential Program, State Hospital, Jean's comprehensive special needs could not be provided adequately or appropriately as a day student in the Washington Program, and a hospital resident.

The Evaluation Team meeting was held on 4-5-77, and attended by the following participants: Parents, Dr. Morris, Rita Mater, teacher, and Linda Oswald, teacher aide at the Program; Susan Fitzpatrick, nurse at Rockport Mental Health Center; and Gregory Shaw, Evaluation Team Chairperson. All relevant assessments were discussed, including: Educational (Exh B-7), Occupational Therapy (Exh B-6), and Physical Therapy (Exh B-9), Social Service (Exh B-5), Psychological (Exh B-8), Medical (Exh B - 3-4).

Although Dr. Morris agreed as a signatory to the goals and objectives detailed in the Education Plan, he regretted in retrospect that the urgency of finding a more suitable permanent residential placement resulted in a lack of specificity in the Plan. Boston School agreed the Evaluation procedure was somewhat rushed, and that the Education Plan did not include the specificity required by the regulations of c. 766.

Boston Public Schools employ an internal review procedure that requires a Review Team to decide any educational placement that is more restrictive than a 502.3 prototype. The review Team approved continuing Jean's placement in the Washington Program for the 1977-78 school year in a 502.5 prototype. Although notations on the Review Team Checklist (Exh B-1) acknowledged the parent's inability to care for their daughter, they claimed that the problems were "not educational in nature". The Review Team recommended that the family problems should be referred to a "proper human services agency".

Jean attended Camp Evergreen during July, 1977 as a residential student at the Middletown Hospital School, Dayville. Both a detailed evaluation of her gains at Camp Evergreen (Exh A-6), and a report from State Hospital, dated 9-28-77 (Exh A-9), concluded that her educational potential improved markedly as a result of the comprehensive services provided on a continuous and consistent basis during the month-long residential placement. However, State Hospital admitted that they were unable to maintain her significant gains as a result of shortage of qualified staff and lack of special resources to meet her abundant profound special needs.

The parents' rejection of the plan was based on the following assertions (Exh A-1): 1. "Failure to provide proper rationale for a 502.5 program, 2. Failure of present educational plan to specify appropriate needs for occupational and physical therapies; and 3. Failure to provide occupational and physical therapies as called for in previous educational plans."

Boston's support of the plan rested on their claim that the educational objectives could be adequately met at the Carlton Program, and that Human Service Agencies should provide components that are not exclusively educational in nature.

B. ASSESSMENTS

According to the Educational Assessment prepared by her teacher at the Carlton program (Exh B-7), Jean seems to have a good sense of awareness of her environment, and will respond quite positively to people whom she likes and is familiar with." Since surgery in 1975 to correct curvature of the spine, she wears a chest to hip vest that further reduces her mobility. She cannot stand up or walk unless given total physical assistance and support of her upper extremities. Her facial expressions indicate her mood and sense of well-being - she smiles when happy, and pouts when sad.

Although she needs assistance in all dressing skills, she can perform some functions with adaptations to her clothing, and constant encouragement. Jean rings a bell placed around her neck to indicate her need for toileting. Despite frequent accidents when she forgets to ring the bell, she responds positively to verbal praise when she is successful.

She enjoys table activities and evidences significant motivation when working on a task in a one-to-one situation. Although her attention span can last for about ten minutes if she is encouraged, she tends to perseverate and must be redirected back to the appropriate activity.

Since she is inhibited motorically by the chest to hip vest and Cerebral Palsy, and requires total support of her upper extremities, her upright posture is limited to three or four minutes at a given time. Jean can walk across parallelbars with minimal assistance holding onto both sides of the bars, crawl on the floor, and roll."

Dr. Morris, Chief Psychologist at the Developmental Disabilities Unit, Rockport Mental Health Center tested Jean on 3-8-77 - prior to her Camp Evergreen placement. According to his report (Exh B-8). Jean functions between the nine month to one year level, placing her within the profoundly retarded range. "Although she is non-verbal, she is responsive to those in her environment with whom she is familiar... In addition, she is able to complete simple one and two step commands".

In pointing to her total dependence on others to provide for her comprehensive special needs, Dr. Morris made the following observations: 1. Since she can neither walk nor crawl, her sole means of locomotion is her wheelchair, and she needs someone to propel her; 2. She can barely feed herself with an adaptive spoon; 3. Despite the use of a spill-proof cup, drinking is still sloppy; 4. Self-dressing, bathing and toileting skills are non-existent; 5. Communication skills are limited to a few giggles and babbles; 6. She responds positively to those with whom she is familiar; 7. Although she is capable of differentiating herself from her surroundings, her attention frequently drifts off and she needs someone to focus her attention; and 8. On a developmental level, she is an individual who is very infant-like and responds to her world passively.

Both the Occupation Therapy Report (Exh B-6) and the Physical Therapy Report (Exh B-9) focused on specific recommendations intended to increase Jean's independence in the areas of feeding patterns and in the use and control of upper extremities. Step by step goals were detailed to improve the student's level of functioning.

In reviewing Jean's educational gains at Camp Evergreen during July 1977, the Final Evaluation (Exh A-6) indicated that there was a wide variance in her daily performance: 1. She did not ring consistently when she required toileting, 2. She did signal consistently when she wanted food, 3. Frequency of chewing food with her mouth closed increased, and 4. She was able to walk with support for four minutes.

Based on the above-cited demonstrated gains, the Directors of Camp Evergreen suggested that her lack of significant performance in the past was the result of placements where expectations were minimal, and the emphasis was on custodial care. "She has the potential to greatly increase her independent living skills." The report recommended "a structured environment, which offers gross and fine motor training. She does not require one to one with constant attention, but rather to be involved in planned activities appropriately designed for her state of cognitive development".

A Social Service Report from State Hospital (Exh A-9) focused on the inappropriateness of continuing her residence at the facility. In indicating Jean's total dependence on the staff to provide for her total needs, the report emphasized the lack of sufficient personnel able to deliver requisite services without seriously affecting delivery of services to other residents. Furthermore, the report pointed out that the building in which Jean is a resident is "not readily barrier-free, having only one such exit which must service 18 other patients, and is on a different ward that is locked. Available elevators cannot be used during a fire emergency." Additionally, "Jean is the only patient who is profoundly retarded, and who is wheelchair bound. We have no programs which are geared for either population, let alone one who has both handicaps," Considering that the Developmental Disabilities Unit has 32 patients, the report claimed that a split in programming would seriously disrupt the present milieu therapy.

Following Jean's grand mal epileptic seizure on 9-15-77, State Hospital indicated that their medical facilities were inadequate to provide for such treatment, and therefore she required hospitalization at the Braddak Hospital. The report concluded that Jean's global special needs required a placement outside her home, but in a comprehensive facility able to promote her educational, social, emotional and medical needs.

C. EDUCATIONAL PLAN

The parents testified that they had considered a residential placement for their daughter a few years ago, but rejected the notion because of their concern about the effect of separation on Jean. Given the realities of the mother's emotional disabilities and the father's physical limitations, they requested a 502.6 prototype in order to meet Jean's comprehensive needs. The parents insisted that any possible residential placement should be within commuting distance so that they may continue their parental relationship.

Dr. Morris stressed that Jean's potential in all areas of functioning is still virtually unknown and untapped. Considering her cognitive, motoric, communication, and social gains after a single month at Camp Evergreen, he urged that she needed a residential placement that would provide a highly structured continuity and consistency in approach between the educational and residential components. Dr. Morris underscored the inadequacy and inappropriateness of a five day per week educational plan.

He further pointed to the lack of adequate physical and occupational therapy services provided at the Washington Program during 1976-77. Although Mr. Miller, Director of the Washington Program, testified that Boston Schools intended to contract with Northeastern Medical Center to provide such therapeutic services, and possible speech therapy as well, he agreed that Jean would benefit from "continuous comprehensive services on a 24-hour basis." He admitted that Boston's contract with the Visiting Nurse Association to provide physical and occupational therapy services during 1976-77 had been disappointing, and indicated that he was hopeful of increased regularity and quality of services from Northeastern.

Bonnie Farrell of State Hospital restated many of the same reservations about continuing Jean's placement at the facility as were included in the Social Service Report (Exh A-9) . Although she acknowledged Jean's gains in affect and responsiveness, eating, and ambulation since her arrival at the hospital, she regretted that the limited resources at the facility were inadequate to maintain her progress made at Camp Evergreen. Ms. Farrell testified that Jean started to regress towards the end of the summer. She recommended residential placement at a facility geared to provide comprehensive services for her profound special needs.

In addressing the notations of the Review Teams concerning their recognition of familiar problems, G. Shaw, ET Chairperson, emphasized that the Boston Schools considered their responsibility solely restricted to providing educational special services. Since there was no dispute that Jean had achieved educational gains at the Program during 1976-77, Mr. Shaw indicated that her continuance in the program for 1977-78 would adequately and appropriately meet her special educational needs. He stressed that other Human Service Agencies - Department of Mental Health, Department of Public Health, and possibly the Department of Welfare - should provide additonal components to serve her global needs. Mr. Shaw admitted that the Boston Public Schools, through their Social Services Department, had not explored involvement with Human Service Agencies.

IV. ISSUE

Whether the Educational Plan proposed by the Boston Public schools for the period from 4-77 to 4-78 is adequate and appropriate to meet the special needs of the child.

V. FINDINGS OF FACT

1. Jean is an eighteen-year-old profoundly retarded student who is presently functioning within a nine to eighteen month level. As a result of Cerebral Palsy and Scoliosis (curvature of the spine), she is a severe quadriplegic and confined to a wheelchair. Following a quiescent period of seven years she had a grand mal epileptic seizure on 9-15-77.

2. She has no expressive language, and virtually no self-help skills, rendering her totally dependent.

3. Her mother's psychiatric disabilities and her father's physical limitations as a result of a coronary attack in 1976 make it impossible for her parents to care for her at home.
4. The child had no educational involvement up to the age of thirteen. She entered the Holy Name Day Care Center, a Department of Mental Health facility, in 9-73 and remained through 6-75. For the past two years she was enrolled in the Boston Public Schools - Blackler School during 1975-76, and the Developmental Day Care Program at the Carlton School during 1976-77.
5. Since 2-25-77, Jean has been a resident at the Adult Residential Program, Developmental Disabilities Unit, Boston Hospital.
6. Dr. Steven Morris requested an updated full - Evaluation on 3-16-77.
7. Evaluation Team meeting was held on 4-5-77.
8. Educational Plan was proposed in mid-May, 1977.
9. Parents rejected the plan on 5-23-77.

* * * * *

The conclusion for the case of Jean can be found on the following page.

CONCLUSION FOR THE CASE OF JEAN

Basedon a careful review of the documentary and testimonial evidence, I find that the Educational Plan proposed by the BostonPublic Schools for the school year covering 4-77 to 4-78 is inadequate and inappropriate to meet Jean's special needs.

All assessments - Exhibits B-3 to B-9, and A-6 and A-9 point to the inescapable conclusion that Jean's special educational needs are global in nature. She is an 18 year old child who functions at an infant-like year old level. She is a severe quadriplegic who wears a chest to hip vest, and is confined to a wheelchair. She has no expressive language other than giggles and babbles. She cannot dress, feed, or toilet herself. She remains passive and uninvolved with her environment except to smile or pout to show her moods. In short, she is totally dependent on others to provide for her survival, and teach her survival skills.

The sole issue in dispute is whether a five day per week placement at the Washington School Developmental Day Care Program will provide adequate structure and special services to meet her profound special educational needs. Such special needs currently impede her ability to function at an independent level commensurate with whatever her full potential may be to achieve educational goals and objectives. Jean's potential for learning, demonstrated by the Final Evaluation at Camp Evergreen (Exh A-6), had not been considered by the Boston Public Schools when the Educational Plan was developed and proposed. Although her month-long experience at Camp Evergreen occured following the development of the plan, Boston Public Schools did in fact have an opportunity to reevaluate the recommended placement, special services, and goals and objectives based on demonstrated educational gain at Camp Evergreen. Her specific skill development at Camp Evergreen is directly related to her profound educational needs since they prove conclusively her potential to achieve educational gains. In their report (Exh A-6), the camp directors attributed her lack of significant performance in the past to placements where achievement expectations were minimal, and the emphasis was on custodial care. They confirmed that Jean has the "potential to greatly increase her independent living skills".

Despite the profoundness of her special educational needs, Jean responded to the intensive special services provided at Camp Evergreen in a residential, 24 hour per day basis by therapists and teachers. Specific educational gains included: 1. Feeds herself with a spoon when given chopped food to ease her difficulty in chewing, 2. Use a glass, 3. Assists in dressing, 4. Washes hands and face sketchily, 6. Walks between parallel bars for four minutes, and 7. Increased frequency of chewing food with her mouth closed.

Mr. Miller, Director of the Washington Program, acknowledged in his testimony the need for a residential placement that would provide highly-structured, comprehensive special services to meet her total educational needs. Furthermore, the notations of the Boston Review Teams in their ordering the continuation of the Washington Program, indicated their concern with the suitability of her current residential placement at State Hospital. (See Exh B-1)

However, while the Review Team's concern rested solely on the inability of the parents to take care of their daughter in their home, they failed to consider that a residential placement, in accordance with a 502.6 prototype, is wholly compatible and consistent with the intent of c. 766 to meet the abundant special needs of the student. Clearly, Jean falls within the class of children with special educational needs, hence eligible for adequate and appropriate services mandated by c. 766.

In regard to the compliance aspects of the Educational Plan, the E.T. Chairperson, admitted that the plan failed to include the specificity required by sections 321.1, 321.2, 321.4, and 321.5 of the regulations of c. 766. However, Mr. Miller pointed to the unsatisfactory arrangement that Boston Schools had in 1976-77 with the Visiting Nurse Association to provide physical and occupational therapy services. He indicated that under an anticipated contract with Northeastern Hospital to provide such services, including possible speech therapy, that Jean would be developed. However, the failure of Boston to include requisite specifics in the plan does not constitute in itself a fatal flaw.

Finally, both Ms. Farrell's testimony and the report of State Hospital (Exh A-9) speak to the inappropriateness of current placement at the facility. The evidence clearly cites the following circumstances that lead to the conclusions that Jean is merely being "warehoused" and not educated at State Hospital, despite the best efforts of the staff. First, the already critical inadequacy of the staff is further exacerbated by Jean's almost constant need for attention to her special needs. Second, since Jean is functioning on a level far lower than other patients in the ward, the milieu therapy employed deprives her of appropriate peer interaction. Third, the lack of specialized staff resulted in Jean's regression when she returned from Camp Evergreen, and fourth, considering that she is confined to a wheelchair, the structural aspects of the building in which she lives pose possible safety hazards in an emergency situation.

Following Jean's emergency placement at State Hospital in 2-77, Dr. Morris steadfastly sought a more appropriate residential placement, primarily through the Department of Mental Health. His testimony and his letters (Exh A-4 and A-5) detailed his frustration and failure to secure adequate and appropriate services for this child. Despite a thorough investigation of existing resources available under the Department of Mental Health, Department of Public Welfare, and the Department of Public Health, no requisite services were available. It must be underscored that the Boston Public Schools, through its Social Services Department, abdicated its responsibility in this matter. Whether Boston saw the need for a residential placement stemming solely from familial problems is not the determining issue. Clearly, the Boston Review Team recognized the inappropriateness of Jean's placement at State Hospital, and still they did not exercise any initiative to find a solution. Mr. O'Reilly c. 766 coordinator, acknowledged that the schools considered exploring a cost-sharing mechanism with a Human Services Agency but no action in this regard.

Since the evidence discussed above points conclusively to the need for a highly-structured residential placement, in accordance with a 502.6 prototype, to meet Jean's multiple educational needs, the tragedy remains that such a placement is unavailable at this time. Therefore, it is urgent that the Interdepartmental Children's Project Team (section 109 of the regulations of c. 766.) be convened without delay to consider the complex aspects of this case, and determine a residential placement that will deal comprehensively and intensively with Jean's multiple educational handicaps. All evidence is conclusive that Jean is a special needs child, and therefore qualified for adequate and appropriate services mandated by c. 766. I find that the Educational Plan proposed by Boston Public Schools is inadequate and inappropriate to meet her profound special needs, and that the legal requirements of c. 766 compel Boston Public Schools to provide a residential placement that will nurture her educational potential. Such a finding is based conclusively on the evidence and is consistent with the legal imperatives of c. 766.

1.15

THE SOCIAL DEFINITION OF DEVIANCY

A PERSON BECOMES DEVIANT

. . . BY BEING DIFFERENT

. . . IN ONE OR MORE WAYS

. . . THAT ARE CONSIDERED IMPORTANT BY OTHERS

. . . WHO VIEW THE DIFFERENCE NEGATIVELY

DEVIANCY AND DIFFERENTNESS ARE NOT IDENTICAL

1.16

CATEGORIES OF DEVIANCE

Mentally Retarded
Mentally Ill
Physically Handicapped
Sexually Unorthodox
Poor
Unemployable
Hyperkinetic

Blind
Epileptic
Criminal
Cosmetically Disfigured
Midgets
Dwarfs

1.17

PAST AND PRESENT PERCEPTIONS OF DEVIANT (DEVALUED) INDIVIDUALS

(WOLFENSBERGER, 1972)

- SUBHUMAN ORGANISM
- MENACE
- OBJECT OF DREAD
- OBJECT OF PITY
- DISEASED ORGANISM
- OBJECT OF RIDICULE
- ETERNAL CHILD
- HOLY INNOCENT

WHAT IS A RETARDED CHILD?

A retarded child is not a shut-in but a "shut-out"
An unmatched plaid; a reject of humanity
An understudy whose leading lady is never sick
The little boy who can't quite reach the brass ring on the merry-go-round
The person left watching the elevator going up and down, and always being told
"next car"
The retarded child is a puppy who never catches his tail
He is a little boy dressed up in his Sunday best one minute,
and his Sunday messed the next
A persevering clock whose hands will never move beyond a certain hour
for all its endless ticking
He is a baby trying desperately to make his own acquaintance in the mirror
A second string player destined to sit on the bench for every game
But above all this - a retarded child is more
A retarded child is a God-like child
Filled with faith, innocence, and trust that all little ones are born with
They are the chosen ones for they know not that they cannot reach the brass ring
Nor do they realize that for them the clock stopped long ago
A retarded child is a visitor in your conscience
Do not turn him away
He stands with one foot in the door of life waiting for you
Invite him in

Author Unknown

NORMALIZATION

UTILIZATION OF MEANS WHICH ARE AS CULTURALLY NORMATIVE AS POSSIBLE IN ORDER TO ESTABLISH, ENABLE AND SUPPORT BEHAVIORS, APPEARANCES, AND INTERPRETATIONS WHICH ARE AS CULTURALLY NORMATIVE AS POSSIBLE

“. . . AS MUCH AS POSSIBLE . . . ” MAY MEAN

1. TO THE LIMITS OF OUR CURRENT KNOW HOW
2. IN REGARD TO EACH SPECIFIC INDIVIDUAL
3. AS MUCH AS THE INDIVIDUAL CHOOSES

1.21

"NORMATIVE" OR "NORMALIZED" MEANS

... WITHIN THE RANGE OF WHAT WOULD NOT ATTRACT ATTENTION AS ODD OR PECULIAR

... OFTEN ENCOUNTERED IN THE MAINSTREAM OF SOCIETY

... CONVENTIONAL

... TYPICAL

"NORMATIVE" DOES NOT MEAN

... NORMAL

... GOOD OR BAD, MORAL OR IMMORAL

... BEING AND DOING LIKE EVERYBODY ELSE

... BEING DEPRIVED OF ALL CHOICES

AS MUCH AS POSSIBLE, AN ATYPICAL PERSON SHOULD BE ENABLED TO BE NORMAL IN:

APPEARANCE

DRESS
GROOMING
PHYSICAL CHARACTERISTICS

BEHAVIORS

SPEECH
GAIT
MANNERS
PEER INTERACTIONS
DAILY ROUTINES

SETTINGS

SCHOOLS
RECREATION
HEALTH SERVICES
RESIDENCE
WORK

INTEGRATION IS

. . . BEING PART OF THINGS; NOT BEING EXCLUDED

. . . HAVING THE SAME PRIVILEGES AS OTHERS

. . . BEING CLOSE TO NON-HANDICAPPED AGE PEERS

. . . RECEIVING SPECIAL SERVICES WITHOUT BEING SEGREGATED

. . . WORKING NEAR NON-HANDICAPPED PERSONS

. . . LIVING IN ORDINARY HOUSING NEAR OTHER NON- HANDICAPPED PERSONS, AND NOT IN LARGE GROUPS

. . . BEING TREATED WITH RESPECT

. . . NOT BEING LABELLED UNNECESSARILY AND NEVER IN A DEVALUATING FASHION

INTEGRATION: SOME THINGS IT IS NOT

. . . BEING FORCED INTO IMPOSSIBLE COMPETITION

. . . BEING DENIED SPECIAL SERVICES

. . . MIXING PERSONS WITH DIFFERENT TYPES OF HANDICAPS

. . . UTILIZING ONLY EXISTING SERVICES

SOME FEATURES OF THE PRINCIPLE OF NORMALIZATION

1. INDIVIDUALIZATION OF PROGRAM AND SERVICES

2. INTEGRATION OF ATYPICAL PERSONS INTO TYPICAL SETTING

3. ELIMINATION OF NEGATIVE CULTURAL AND SOCIAL STEREOTYPES SURROUNDING ATYPICAL PERSONS

ACTIVITY THREE: NORMALIZATION QUESTIONNAIRE

This is a short questionnaire for you to fill out. There are no right or wrong answers to these questions although the Normalization Principle might indicate certain choices as preferable to others. It might be interesting to mark both the way you feel personally and the response which you think "normalization" would indicate.

1. Agree strongly
2. Agree
3. No opinion
4. Disagree
5. Disagree strongly

1) ____ Ideally, a retarded adult should live at home with his/her parents.

2) ____ Retarded people should be protected from the possibility of failure.

3) ____ Mentally retarded people should be given the same civil rights as other people (voting, trial by jury, etc.)

4) ____ Children in state institutions should go to school in the community.

5) ____ Teachers shouldn't be required to keep children in their classes if they feel the children are not benefitting.

6) ____ It is more important to change society's attitude towards handicapped people than it is to change the handicapped people.

7) ____ Children who aren't toilet-trained should not be in school.

8) ____ We should immediately abolish special classes for:

____ Educable retarded children

____ Trainable retarded children

____ Emotionally disturbed children

____ Physically handicapped children

____ Deaf children

____ Blind children

9) ____ Normalization implies that all people should be treated as though they are normal.

10) ____ There are quite a few severely handicapped individuals who will never be able to do anything resembling work.

11) ____ One way to promote integration would be to put blind, retarded, and physically handicapped children in the same school.

12) ____ Professional human service workers need to separate personal values from their professional work.

13) ____ Typical students should not be subjected to the behaviors and mannerisms of severely handicapped students.

14) ____ It is the responsibility of all school systems to educate its students relative to the needs of persons who are handicapped.

CRITERION TEST — MODULE ONE

(30 pts) 1. Describe three components of a system.

(8 pts) 2. Number the following education placements from least restrictive (1) to most restrictive (8):

____ Itinerant teacher (tutor) in regular classroom

____ Resource room and regular class

____ Special day school

____ Regular classroom, special education materials, equipment

____ Special residential facility

____ Part-time regular classroom and special classroom

____ Regular classroom; materials, equipment, consulting services

____ Self-contained special classroom

(30 pts) 3. Describe in your own words what "normalization" means.

(10 pts) 4. Mark True or False
(2 pts each)

1. ____ The names of all participants on an Evaluation Team need not be recorded.
2. ____ Bi-lingual parents must be informed, in their primary language, of their child's educational status.
3. ____ A student may be denied special services because the school system does not have the appropriate services available.
4. ____ Criteria for a student's movement from the recommended educational environment to a less-restrictive one must be stated on the IEP.
5. ____ Parents can reject an academic placement recommended by the Evaluation Team after an education plan has been written.

(15 pts) 5. List at least 3 major stages needed to implement an Individualized Educational Plan according to Chapter 766 (5 pts each)

(0 pts) 6. Define at least six of the following:

. L.D. -

. E.M.R. -

. T.M.R. -

. E.D. -

. 766 Child -

. autistic -

. B.D. -

. M.B.D. -

. S&P -

. M.R. -

. C.P. -

(7 pts) 7. Johnny is M.R. What does that statement tell you about Johnny?

LEAST RESTRICTIVE ENVIRONMENT

121a.550 General

(a) Each State educational agency shall insure that each public agency establishes and implements procedures which meet the requirements of 121 a. 550-121a.556

(b) Each public agency shall insure:

(1) That to the maximum extent appropriate, special needs children, including children in public or private institutions or other care facilities, are educated with children who do not have special needs.

(2) That special classes, separate schooling or other removal of special needs children from the regular educational environment occurs only when the nature or severity of the disability is such that education in the regular class with the use of supplementary aids and services cannot be achieved satisfactorily.

121a.551 Continuum of Alternative Placements

(a) Each public agency shall insure that a continuum of alternative placements is available to meet the needs of special needs children for special education and related services.

(b) The continuum required under paragraph (a) of this section must:

(1) Include the alternative placements listed in the definition of special education under 121a.13 of Subpart A (instruction in regular classes, special schools, home instruction, and instruction in hospitals and institutions, and

(2) Make provision for supplementary services (such as resource room or itinerant instruction) to be provided in conjunction with regular classroom placement.

121a.552 Placements

Each public agency shall insure that:

(a) Each handicapped child's education placement:

(1) is determined at least annually
(2) is based on his or her individualized education program and
(3) is as close as possible to the child's home.

(b) The various alternative placements included under 121a551 are available to the extent necessary to implement the individualized education program for the child

(c) Unless a handicapped child's individualized education program requires some other arrangement, the child is educated in the school which he/she would attend if not handicapped; and

(d) In selecting the least restrictive environment, consideration is given to any potential harmful effect on the child or on the quality of services which he or she needs.

PARENT'S RIGHTS

According to the Educational for All Handicapped Children Act and its proposed regulations, parents of handicapped children have the right to:

1. participate in the annual planning meeting of your child's Individual Educational Program (IEP) and annual evaluation.
2. agree to a time and place for those meetings (always held before the beginning of the affected school year).
3. instruct the local school agency to hold these meetings in your primary language (or make special arrangements for your handicap, if any, including deafness) so that you can understand the proceedings.
4. give your consent before an evaluation is conducted.
   (Parents signature was not obtained before the CORE evaluation was conducted)
5. give voluntary written consent to any activities proposed for your child.
6. seek an independent evaluation of your child, at public expense, if you find the school's evaluation inappropriate. (The school may request a hearing to decide the appropriateness of its evaluation. If the ruling is in the school's favor, you still have the right to submit an independent evaluation which must be considered but which is then conducted at your own expense.)
   (Parent's request for an independent evaluation of this child was denied.)
7. have written notice of any proposed change in identification, evaluation, of placement of your child or the school's refusal to change any of those.
8. attend and comment at the annual public hearings held prior to adoption of state program plan. (hearing must be publicized in advance.)
9. receive a full explanation of procedural safeguards and a description of any proposed action regarding your child.
10. see, review, and, if necessary, challenge your child's record in accordance with the Family Educational Rights and Privacy Act of 1974.
11. request a hearing on any proposal to initiate or change the identification, evaluation, or placement of your child, or the agency's refusal
12. request a copy of information from your child's record before it is destroyed, in compliance with the law, 5 years after its usefulness ends.

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CHILDREN'S RIGHTS

According to the Education for All Handicapped Children Act and its proposed regulations, handicapped children have the right to:

1. a Free and Appropriate Public Education if they are between the ages of 3 and 18 by September 1, 1978 and if between the ages of 3 - 21 by September 1,1980
2. the same variety of programs and services that children without handicaps enjoy including nonacademic subjects and extracurricular activities.
3. placement in the least restrictive learning environment, as much as possible with non-handicapped children, and whenever possible at the same school they would go to if not handicapped;
4. the availability of a number of alternative learning settings if attending a local public school is not possible;
5. priority use of supplemental Federal funds for those not now being served at all;
6. appointment of a person to act as parent, to be the child's advocate and to participate in evaluation and program meetings with the school if natural parents are unavailable or if the child is a ward of the state;
7. participation in the writing of their own Individual Educational Program (I.E.P.) "where appropriate";
8. placement outside the local school district in another public school or a private school at the state's expense if local schools do not have an appropriate program;
9. testing, for purposes of evaluation and placement, free of racial or cultural discrimination;
10. annual review of placement based on IEP and at least an annual review of that program before each school year begins;
11. remain in present placement during any administrative or judicial proceedings or the right to attend a public school if the complaint involves an application for admission to public school;
12. privacy and confidentiality of all personal records.

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3

MODULE TWO

THE PRE-REFERRAL PROCESS: IN-SCHOOL SOLUTIONS

PARTICIPANT'S MANUAL

INTRODUCTION TO MODULE TWO

This module will introduce you to the factors that affect behavior, and the skills necessary for making appropriate decisions for students in the Pre-Referral Period. The Pre-Referral Period is specified in Chapter 766 Regulations, Paragraph 314.0. This regulation states that:

> Prior to referral of a child for an evaluation, all efforts be made to meet such child's needs within the context of services which are a part of the regular education program. Such efforts shall be documented and results with a copy of same maintained on the student's record. Nothing contained in this paragraph shall be construed to limit or condition the right to refer a child for evaluation.

Overview Objectives

After completing this module the participant will:

1) Understand the conceptual model of the Pre-Referral Period as part of the IEP process.
2) Develop an awareness of three factors (student's learning style, sociocultural influences, school systems) that affect learning.
3) Identify three methods (anecdotal recording, frequency counting, and permanent products) to observe, record and measure behavior.
4) Identify four methods ("The Educational Assessment", the graded word list, the paragraph reading test and task analysis) for informally assessing entry level skills.
5) Judge the accuracy of task analysis.
6) Conduct an analysis of main behavioral tests.
7) Analyze patterns of behavior that emerge through the use of recording behavior.
8) Specify practical classroom strategies for the teacher to use to modify the regular school program to meet the students' needs.
9) Develop a record keeping system to document all efforts in the Pre-Referral Period.

CRITERION TEST — MODULE TWO

FILL IN THE BLANKS

1. Prior to the referral, all efforts must be made to meet the child's needs in ____________________. These efforts shall be ____________________ and the results maintained in the ____________________.

2. Three major factors that affect learning include ____________________, ____________________, and ____________________.

3. A statement of the student's learning style includes ____________________, ____________________, and ____________________.

4. Three indicators of academic problems are ____________________, ____________________, and ____________________

5. List three ways that teachers can systematically record student behavior. ____________________

____

____

6. List two methods/procedures for each stage that teachers should use when teaching new skills.

a. Initial Acquisition Stage ____________ ____________

b. Proficiency Stage ____________ ____________

c. Maintenance Stage ____________ ____________

7. List two methods to informally assess the students ability to read assigned materials.

____

____

8. Task analysis is the process of ______________________,

______________________, and ______________________

______________________ all necessary subtasks.

9. List three steps in task analysis:

____

____

____

10. Regular school services that can be utilized for students in the Pre-Referral Period include:

____________________ ____________________

____________________ ____________________

THE TEACHER'S ROLE IN THE PRE-REFERRAL PERIOD

By

Margaret Reed and Susan Schachter

Background Information

Paragraph 314.0 of the Massachusetts Chapter 766 Regulations involves the classroom teacher in attempting to resolve the student's problems in the regular classroom setting. The paragraph states:

> Prior to referral of a child for an evaluation, all efforts will be made to meet such child's needs within the context of the services which are part of the regular education program. In addition, all efforts shall be made to modify the regular education program to meet such needs. Such efforts and their results shall be documented and placed in the child's record. Nothing contained in this paragraph shall be construed to limit or condition the right to refer a child for an evaluation.

The thrust of this paragraph is placed on the attempts to resolve the student's problems within the context of the regular education program. The Massachusetts Center for Program Evaluation cites two major reasons for including a pre-referral procedure in the identification and evaluation process:

1. Individual student problems that can be resolved within the regular classroom setting without special services saves the school system time, money, and eliminates unnecessary and inappropriate placement of children.

2. If a problem cannot be resolved in the regular classroom setting, the collection of specific information by the teacher about the child, (e.g. present education performance levels, identification of strengths and weaknesses, behavior pattern) will serve as a valuable guide for an evaluation. The evaluation team will be able to select the types of assessment devices needed based on the information presented by the teacher.

Classroom teachers should know that specialized evaluations do not yield any more information about the student's strengths and weaknesses than their own observations. Research has shown that even after medical, psychological and psycho-educational testing has taken place, the combined diagnosis is usually identical to the behaviors and needs listed by the student's classroom teacher. The skills of observing and analyzing behavior are skills that most teachers already possess. Module Two will familiarize and/or review ways to assess behavior that match teaching strategies so that school problems can be recognized and solved before formal evaluation procedures are initiated.

Pre-Referral: A Decision-Making Process

During the pre-referral period, the teacher attempts to meet the needs of the student in the regular class before making a referral. The teacher begins this process by first gathering available student information so that the student's strengths and weaknesses can be identified. Once these are established, the teacher devises and implements strategies to meet the student's needs by modifying instruction and/or utilizing regular school services. The teacher then evaluates the strategies employed. Either the problem is solved, or the teacher implements an alternative strategy. When all alternative strategies have been exhausted, a referral is made.

Prior to devising strategies to solve problems, the teacher must understand the relationship between classroom conditions and the student's behavior. The first step is to understand the factors that affect learning. In this module, three factors that affect learning are considered. These factors have been broken down into three major areas:

a. Student's Learning Style
b. Sociocultural Factors
c. School Systems

The information collected by analyzing these factors should lead to modification and/or change in the regular school program.

Student's Learning Style

Educators long have recognized that people learn at different rates and through different modalities. Some people learn best by reading, some by observing, and others by talking or working with their hands. It's not unusual to find people who work best under pressure, others under continual prodding, and still others in a free, relaxed atmosphere. Educators also know that some people work better in group situations and others do better working alone.

Identification of learning styles of children is important to teachers in order to plan curriculum and develop appropriate instructional strategies. Charles (1976) lists five procedures that teachers can utilize to discover differences in learning styles that exist among their students:

1. check existing records for scores on different sections of intelligence, achievement, and aptitude tests
2. ask students about their hobbies and special interests
3. observe students at play and in art and construction activities
4. observe performance in activities with time limits and in work that is highly competitive
5. observe response to criticism, cajoling, and encouragement (p. 172)

Charles also suggests that teachers can collect information by making mental or index card notes of what is observed, keep track of which students work quickly or slowly, individually or in groups, which react positively or negatively to pressure, to threats, and to praise, and which profit most from reading, talking, and working with their hands.

It is important for teachers to examine the learning style of the children in their classroom, especially those that are potential candidates for referral. The possibility that the mode of instruction is in conflict with the child's learning style, should be explored. A teacher might find that a change in the method of presenting information and/or the options for completion of an assignment given to a child can improve academic performance. We, as educators, sometimes place too great a burden on the student and don't examine our instructional strategies for modification. The student usually is considered the cause of the problem, not the teacher or the learning environment.*

Sociocultural Influences on the Learner

Hamill and Bartell (1975) point out that behavior can be seen as an interaction between previous individual experiences and environmental demands. A student's sociocultural background will, therefore, influence the student's behavior. Educators who do not understand this may confuse cultural differences with deviant behavior. Sociocultural factors that may influence the student include:

---

*This section on learning style appears in article "Pre-Referral/Referral" developed by the Massachusetts Center for Program Development.

1. Language background of the family
2. The student's attitudes, interests, values and self-image
3. Parental demands on the school and student
4. Temporary family crisis or problem history
5. Socioeconomic differences
6. Peer pressure

Educators should ask some of the following questions when trying to understand the student's behavior:

a. LANGUAGE BACKGROUND OF FAMILY

   Check to see what language is primarily spoken in the home.

   Has English been the student's continual language from infancy on?

   What problems have dual language caused for the student?

   What behaviors might be tied into the student's language problems?

b. ATTITUDES, INTERESTS, VALUES, SELF-IMAGE

   What matters to this student?

   How does s/he feel about home, school, himself/herself?

   How does s/he see himself/herself - as a loser, a troublemaker, dumb?

   Does s/he seem to feel that s/he is in control of his or her life?

   What behaviors has s/he learned to compensate for or cover up these feelings?

   What triggers these behaviors in the classroom?

c. PARENTAL DEMANDS ON THE SCHOOL AND THE STUDENT

   What are the dynamics of the family?

   Is it intact?

   Is school a release for the student?

   Are there unrealistic pressures to perform?

   Are familial standards beyond the reach of the student?

   Where does the student stand in the "pecking order" of the family?

   Does the family value education?

   Is school seen as a substitute structure for a family in crisis?

   Can the parents 'handle' the student's behavior at home?

   Who is the primary care giver in the family, one of the parents, the student, or a sibling?

How does the family react to the student's problem - punishment, ignoring problems, unable to deal with the problem?

Are parents supportive of the school or adversaries to the educational process?

What behaviors, taught and encouraged at home, bring the student into conflict in the school setting?

d. TEMPORARY FAMILY CRISIS OR PROBLEM HISTORY

Is the home offering the student any structure, role models, or adequate support?

Has the student's behavior changed radically following a home-crisis such as a parent death, parent illness, parent separation?

Has the family been stable up to the time of the crisis?

What behaviors has the student learned stemming from the crisis or history? For example, if the student has lived 14 years with an alcoholic and abusive father, can her problems with authoritarian male teachers be understood and her disruptive and aggressive behavior towards them be changed?

In view of the temporary crisis, what are realistic academic demands?

e. SOCIOECONOMIC DIFFERENCES

Are the family and the student invested in the process of education?

Is education seen as a luxury next to family survival needs or as a road out of a lower socioeconomic level?

Is your teaching approach relevant to the student, at this time, in content area and direction?

Are you aware of role models valued by the student but different or unacceptable to you?

Are behaviors you find disruptive or unacceptable encouraged and seen as normal by the social group of which the student is a member?

f. PEER PRESSURES

If the student tries to follow acceptable school behaviors, what will this do to his or her standing with his or her friends?

Have friends replaced family as a needed secure group?

What needs are fulfilled by the school? For example, a student with a history of failure become a group 'hero' by threatening or verbally abusing teachers.

What type of academic or other success would it take to change behavior?

Is change possible after so many years of failure?

Will the student's group be supportive of behavior change or will this change be seen as failure or 'selling out'?

Does the student have to choose between doing what you want or doing what his friends want, between what is acceptable to you and what is acceptable to his friends?

School Systems

The third major factor that can affect learning is the school system. While much of the past research on student learning has tended to show that the child's socioeconomic background is the major determinant of his/her academic success, recent research has revealed those school-controlled factors that do impact upon learning in a significant way. Interestingly, these school-controlled factors have increasingly been used as the basis for those court cases charging school systems with the perpetuation of existing inequalities. The most obvious among these factors is the school budget, but there are others, such as the administrative organization, the physical plant, the quality of instruction, style of communication, and teacher and community attitudes.

Recording Behavior

Measurable behaviors are observable, definite actions with a beginning and an end. To attempt to change behavior, the actions must be taking place frequently. Infrequent actions are not open to change because the subject has few opportunities to experience consequences of his or her action.

Observations of behavior must be concretely gathered, rather than felt or guessed at. Too often, behavior is either minimized or maximized out of proportion to actual events. To modify or change behavior, it is necessary to have a clear picture or objective record of the frequency and type of behaviors present.

In modifying behavior, the first step is obtain a record of the student's current performance level under normal conditions. The teacher must establish the level at which the behavior is occurring before s/he attempts to modify it. The record of the current level of performance is called the baseline. The goal of establishing baseline measures is to obtain a reliable indication of the behavioral strength. The number of different observation periods needed to obtain a reliable measure would depend upon the fluctuation and frequency of the targeted behavior. Typically, daily recordings over three days or so, would be sufficient. However, a behavior which fluctuated considerably might require a longer baseline recording period in order to obtain a reliable measure.

This baseline recording provides the teacher with an objective indication of the student's behavior. After the baseline level is established, the teacher can then implement an intervention procedure designed to improve the student's behavior. By comparing baseline and intervention results, the teacher can evaluate the effectiveness of his/her intervention procedure upon the student's behavior. Subjective judgment is not a reliable basis on which to begin work on behavior. Too often, personal feelings or bias enter into the judgment, and the frequency of the observed behavior is either minimized or maximized out of proportion to actual events.

In this module, three recording techniques will be introduced:

a. anecdotal recording
b. frequency
c. permanent product

Anecdotal Recording

Anecdotal recording is a narrative form of charting, involving a who, what, where and when method. This method is utilized if the behavior does not occur often, occurs in different situations, and is easily observed. Keeping anecdotal records on a student provides a thorough, ongoing, observational record that will help the teacher to understand the dynamics of the learner. This record will eventually identify patterns of behavior so that the teacher can begin to individualize instruction to meet the student's needs. The Maryland Teacher Training Program, on "Observation of Behavior", states the following criteria for a good anecdote:

- Give the time, the date, the place, and the situation in which the action occurred. This is called the setting.
- Describe the actions of the pupil, the reactions, the reactions of the other people involved, and the response of the pupil to these reactions.
- Quote what is said to the pupil and by the pupil during the action.

- Supply "mood cues" - postures, gestures, voice qualities, and facial expressions that give clues to how the child felt. Such mood clues do not provide interpretations of feeling, but only the cues. Pupils might be asked to describe how they felt in a particular situation.

- Describe extensively enough to cover the episode. The action or conversation is not left incomplete and unfinished, but is followed through to the point where a little vignette of a behavioral moment in the life of the pupil is supplied.

Frequency Counting/Event Recording

One of the most practical and useful observation procedures is frequency counting or event recording. With this procedure, the teacher keeps a tally of the number of times a particular behavior occurs over a specific time period. For instance, a teacher may count the number of times a student drops his/her pencil during a one hour class.

Frequency counting is a good procedure for measuring short duration behaviors such as talking out, aggressive behavior, and the number of reading errors. This procedure would not adequately measure other behaviors of longer duration such as the student being out of his/her seat. Out-of-seat behavior may occur only one time during a specific period. This recording may seem minimal and lead one to think that this behavior is not a problem; however, if the student does not return to his seat, this recording would give a poor idea of what the student was actually doing.

Advantages of frequency counting are that it is a simple procedure which actually does not interfere with on-going activities. The teacher also obtains a numerical output that is easy to graph and record.

Convenient methods of tallying behaviors include tallying on a note pad or masking tape wrapped around the teacher's wrist. Also, the teacher may place marks on a chalkboard or use a handheld digital counter which may be clicked each time the behavior occurs.

Direct Measurement of Permanent Product

A measurement technique that teachers have been using for years is the direct measurement of permanent products. With this technique, the teacher measures the tangible output of a student's work. Many activities that the student partakes in within the classroom, result in a permanent product that can be easily measured. Some examples of the measurement of permanent products include, the grading of written spelling words, arithmetic equations, written answers to reading comprehension and the percentage of incomplete work. This technique is especially important to teacher as it often gives an accurate representation of the student's academic performance.

In utilizing any of these forms, it is imperative that the observer have a clear idea of the purpose for which the recording or charting will be used. A good definition of behavior comes from Wallace and Kaufman (1973). They state: "Behavior must be defined as observable (something which someone can see or hear), countable (something that can be recorded accurately), and repeatable (something that occurs more than once). The teacher must pinpoint exactly what the child does or does not do rather than how the child feels or makes others feel. Interpretation of behavior must not be confused with the behavior itself" (p. 14).

Informal Assessment

Informal assessment further helps to explore other strategies and possibilities as to which modifications in the regular school program would be helpful in solving the educational problem that the student is having. It also guides the teacher in making decisions about which regular school services should be utilized to help meet the student's needs.

Six areas of assessment the teacher may want to consider in an education assessment are: 1) school/behavioral/emotional adjustment; 2) physical appearance/gross motor ability; 3) perceptual-motor skills; 4) verbal communication; 5) written communication; 6) content area subjects. By using descriptive language in making the educational assessment the teacher will obtain a clear picture of the student's strengths and weaknesses.

Quick informal tests can be administered to the student to gain information for the educational assessment. Informal tests can be scheduled during the regular class period, during a time when the remainder of the students are working on independent assignments. A good test battery consists of informal assessment in reading, spelling, math, and handwriting.

Depending on the student's difficulty, one or more may be administered.

Task Analysis

Task analysis is the process of isolating, describing, and sequencing all necessary sub-tasks which, when the child has mastered them, will enable him/her to perform the task.

Any diagnostic or instructional procedure can be subjected to a task analysis. Prior to considering the teaching of a task, an analysis of its component parts can be conducted. How an individual performs a task successfully can serve as a model for analysis. For example, what steps are included in an individual's tying of his/her shoes? There are discrete steps involved in the task that are sequential, and also, in some tasks such as tying shoelaces, there may be more than one way to analyze or complete the task.

The isolation of discrete steps of a task is not an easy process. According to Thiagarajan, Semmel and Semmel (1974), there are a number of steps required to complete an analysis of a task. They describe these steps:

1. Specify the main task. This step requires a comprehensive statement of the task's objective. It should indicate the skill the trainee is expected to acquire upon the completion of instruction and the situation in which the skill will be used...
2. Identify sub-tasks at the preceding level of complexity. This step is accomplished by asking, "What skills should the trainee possess in order to perform the main task?" Obviously, hundreds of skills contribute to any performance but, at this stage, we are interested only in identifying those that immediately contribute to our main task...
3. Treat each sub-task as a main task and repeat the analytic procedure.
4. Terminate analysis when the sub-task reaches the entry level of the student. An analysis of the task can be halted at a logical point. This analysis does not include tasks that are obviously within the student's repertoire of entry skills (pp. 32-35).

Thiagarajan, Semmel and Semmel (1974) have developed a checklist for judging the adequacy of a task analysis. Their criteria include:

> Relevance. Is the main task relevant to the effective performance of a teacher in a real-world classroom with special needs students?
>
> Completeness. Are enough sub-tasks listed to cover the performance of the main task? Has any essential sub-task been omitted?

> Triviality. Is any sub-task included which is simpler than the entry level of the student?
>
> Necessity. Is each sub-task necessary for the performance of the main task? Are any of the sub-tasks unnecessary?
>
> Redundancy. Is any sub-task repeated more than once with or without minor changes in wording? Is any set of sub-tasks an alternate for the performance contained in another set of sub-tasks? (p. 41).

In developing a task analysis, the teacher must judge its accuracy to assure than an adequate instructional program is developed for the child. In some cases, the subskills can be determined by performing the task or observing a successful performance of the task.

After a task's component parts are analyzed and placed into a hierarchy or sequence of skills, the educator must find the student's entry level, i.e., the sub-task in the sequence of skills that the learner is able to complete successfully. A "rule of thumb" for identifying the sub-tasks within the main tasks for instruction, is to include no more than five levels or sub-tasks for a main task (Stolovich, 1976). If it is necessary to extend the analysis beyond five levels in order to reach the child's entry level, one of the sub-tasks should probably be chosen as the main instructional task. For example, if the instructional task is the telling of time to the nearest hour on a standard wall clock, sub-tasks should relate directly to the completion of the main task. Although in this task, the learner must identify orally the numerals in order to express time, the recognition of numerals should not be one of the child's entry skills. If the child cannot recognize the numerals, s/he may not be ready to identify the symbols for time.

In-School Solutions

Alternative teaching strategies and/or regular school services can be utilized to meet the student's learning and behavioral needs, once his or her strengths and weaknesses have been determined. The teaching strategies on the following pages are referenced to observable behavior such as:

1. Inability to Understand and/or Participate in Discussion at Group Level.
2. Disruptive Behavior
3. Inability to Complete Assignments
4. Inability to Produce Legible Work
5. Inability to Work on a Group Level
6. Inability to Organize and Refine Information

7. Inability to Follow Directions
8. Inability to Comprehend Written Material

These strategies will aid the regular classroom teacher in servicing students who are experiencing school difficulties.

INABILITY TO UNDERSTAND AND/OR PARTICIPATE IN DISCUSSION AT GROUP LEVEL

... In content areas, try to involve basic information concerning personal data: age, birth date, telephone numbers, etc.

... Involve students in note taking describing his/her surroundings including:

a. physical attributes of objects
b. functional attributes of objects
c. personal reaction to, and association with, it.

... Re-teach information as often and in as varied a manner as possible.

... Assign several students to view film-strip tape presentation. Give them written outline to follow and require them to summarize assignments on tape for class.

... Give student felt tip pen and "write-on" slides. Illustrate words for vocabulary and spelling.

... Point out comparisons and contrasts and ask simple direct questions. Break down abstract concept with concrete objects. Relate them to the student's experiences, if possible.

... Assign a television show related to content area or assignments. Require full descriptions, use of adjectives and adverbs. Have him/her tell all s/he can about a picture or object and have him/her use as many descriptive words as possible.

... Include manipulative materials such as geometric models, calculators, computational devices, colored charts, cards, or diagrams, and games and puzzles. Pair concrete and less abstract concepts and eventually lean less on the concrete as abstract concepts are understood and mastered.

... Consider teaching the student as you would a child who is deaf. Think of a technique that would get the concept over. How would the student prove mastery of the concept if s/he were deaf?

... Consider teaching the student as you would a child who does not speak English. Think of a technique that would relate the concept.

... Use memory games to help bring home important dates or items like playing Concentration with History dates and Scientific formulas. Involve entire class.

INABILITY TO UNDERSTAND AND/OR PARTICIPATE IN DISCUSSION AT GROUP LEVEL [cont'd]

... The student should be encouraged to attend lectures and visit institutions which would relate to the topic of study.

... Point out similarities and differences in new material.

... Provide review.

DISRUPTIVE BEHAVIOR

... Offer definite structure to the student by anticipating opportunities for distraction and out of control behavior. Teach to the attention span of one student. Do not allow speaking out. Have teaching area cleared of old notes or other extraneous materials. Detail specific time periods students must sit.

... State clearly consequences for behavior. Sit with the student and devise list of four behaviors and four specific consequences. Do not waver in carrying through consequences.

... Utilize T.O.T. (Time on Task) information. Give reasonable assignment and a definite length of time. At end of time, call up student and detail the amount of time s/he spent on the task. Ask for two minutes more for an appropriate reward. Chart T.O.T. with student or class and display amount of work produced and number of correct items.

... Teach to students' ability and strengths. Provide short tasks that do not take long to accomplish.

... Provide alternative actions if a child's impulses cannot be curbed. Help him/her to find more appropriate responses.

... Set up activities that allow student to participate in energy-consuming activities, especially if s/he has poor attentional control.

... Construct instructional activities so that a variety of responses are required.

... Set firm limits beforehand but be flexible enough to avoid confrontive power struggles with the student.

... If you are aware that a child has a specific problem, avoid forcing the student into a situation where failure is certain. Don't require student to publicly demonstrate his/her inability.

... Do not attempt to get the "last word" with an out of control student. Turn the class and your attention to any activity until student has regained self-control.

... Utilize any charting device or rewards that are effective with the student. Do not pick reward or charting form alone – do it with the student.

INABILITY TO COMPLETE ASSIGNMENTS

... Allow student to take written assignments with the rest of the class but offer him/her extra time to relieve pressure involved with writing and feedback. Alternate written tests and oral quizzes. On written tests, break up format with multiple choice, true and false, and matching items.

... Offer definite structure to the student by anticipating opportunities for distraction and out of control behavior and to the attention span of the one student.

... Utilize student contract. Spell out what the student is to accomplish to meet requirements for credit. Include grade specification.

... Break long assignments into shorter parts.

... Make assignment sheets simple and use work sheets with clear, legible printing and spacing. Break up large written amounts with double spacing and indentations. Use pictures, diagrams, or charts whenever possible.

... Design instruction to meet strengths – have student design Social Studies collage from cut-out pictures, utilize manual manipulation in math classes. Offer sorting opportunities such as sorting molecular modules or pairing specie traits in Science.

... Ask questions continually throughout the presentation. Ask the student to repeat assignment privately prior to beginning work.

... Utilize T.O.T. (Time on Task) information. Give reasonable assignment and a definite length of time. At end of time, call up student and detail the amount of time s/he spent on the task. Ask for two minutes more for an appropriate reward. Chart T.O.T. with student or class and display the amount of work produced and number correct.

... In small spelling pad or notebook, write the date, classwork or homework to be done. Obtain parental support. Have child take booklet and assignments home weekly. Parents must sign completed assignments and future assignments. Help the student develop ways of finding necessary papers and equipment such as having a manila envelope for homework, a special section in his/her notebook for assignments, etc.

... Reduce the number of pages, examples, and/or questions to be answered on a worksheet, workbook, or text.

... Provide printed directions to accompany oral directions and vice versa.

INABILITY TO COMPLETE ASSIGNMENTS [cont'd]

... Vary assignments so that written work is not always required. The following suggestions may work:

a. dramatization of a historical work
b. newscasting of a special event
c. surveys, public opinion polls, games
d. involvement in community activities
e. making models, collages, painting, filmstrips, films, etc.
f. tape reports
g. present a radio or television play

... Teach to student's ability and strengths. Provide short tasks that do not take long to accomplish.

... Involve student in note taking describing his/her surroundings, including:

a. physical attributes of objects
b. functional attributes of objects
c. personal reactions to and association with it

... Encourage team projects so the student can share tasks.

INABILITY TO PRODUCE LEGIBLE WORK

... Offer alternative assignments for one or two students while continuing on in the regular manner of instruction with the group.

... Utilize the following activities rather than routine assignments:

a. classroom demonstrations
b. present a play
c. role play
d. tape the report or investigation
e. produce a lesson for other students
f. give oral reports

... Allow tests to be taped, dictated to another person, or given orally so that only content understanding is measured.

... Break long assignments into shorter parts.

... Design instruction to meet strengths – have student design Social Studies collage from cut-out pictures, utilize manual manipulation in math classes, offer sorting opportunities such as sorting molecular modules or pairing specie traits in Science.

... Give student felt pen and blank "write-on" slides. Illustrate words for vocabulary and spelling.

... Have students use lined paper to avoid illegible sentence or math computations. Encourage him/her to skip lines. Encourage him/her to write in cursive.

... Utilize points for each task done correctly. For example, in an English assignment give one point for correctly copying the sentence, one for the process required (e.g., punctuation, capitalization, parts of speech), one for appropriate spacing, etc. Utilize same system for math and science.

... Consider teaching students as you would a child who is blind. Think of a technique that would relate the concept. How would the student prove mastery of the concept if s/he were sightless?

... Avoid excessive written exercises.

... Construct tests so that only content, not legibility or spelling skills, are counted.

... Encourage the student to use a typewriter.

INABILITY TO PRODUCE LEGIBLE WORK [cont'd]

... Vary assignments so that written work is not always required. The following suggestions may work:

a. dramatization of an historical event
b. newscasting of special events
c. survey, public opinion polls, games, etc.
d. involvement in community activities
e. making models, collages, painting, filmstrips, films, etc.
f. tape report
g. present a radio or TV play

INABILITY TO WORK ON A GROUP LEVEL

... In content areas, try to involve basic information concerning personal data: age, birth date, telephone numbers, etc.

... Involve student in note taking describing his/her surroundings including:

a. physical attributes of objects
b. functional attributes of objects
c. personal reactions to, and association with, it

... Re-teach information as often and in as varied a manner as possible.

... Utilize a student contract. Spell out what the student is to accomplish to meet requirements for credit. Include grade specification.

... Offer alternative assignments for one or two students while continuing on in the regular manner of instruction with the group.

... Show the student(s) a picture or model relevant to the content area being taught. Let it be examined for one minute – then remove it and ask questions about it.

... Design instruction to meet strengths – have student design Social Studies collage from cut-out pictures, utilize manual manipulation in math classes, offer sorting opportunities such as sorting molecular modules or pairing specie traits in Science.

... Give student felt pen and blank "write-on" slides. Illustrate words for vocabulary or spelling.

... Point out comparisons and contrasts and ask simple direct questions. Break down abstract concepts with concrete objects and relate them to the student's experience if possible.

... Assign a television show related to content area or assignments. Require full descriptions, use of adjectives and adverbs. Have him/her tell all s/he can about a picture or object and have him/her use as many descriptive words as possible.

... Utilize points for each task done correctly. For example, in an English assignment, give one point for correctly copying the sentence, one for the process required (e.g., punctuation, capitalization, parts of speech), one for appropriate spacing, etc. Utilize same system for math or science.

INABILITY TO WORK ON A GROUP LEVEL [cont'd]

... Include manipulative materials such as geometric models, calculators, computational devices, colored charts, cards or diagrams, and games and puzzles. Pair concrete and less abstract concepts and eventually lean less on the concrete as abstract concepts are understood and mastered.

... Consider teaching the student as you would a child who does not not speak English. Think of a technique that would get the concept over.

... Have the student read books pertaining to the subject matter on a simplified reading level.

... Reduce the amount of required reading by selecting key passages for the student.

... Investigate "remedial reading" programs for the student.

... The student should be encouraged to attend lectures and visit institutions which would relate to the topic of study.

... Allow student to seek help from others.

... Point out similarities and differences in new material.

INABILITY TO ORGANIZE AND REFINE INFORMATION

... Allow student to take written examination with the rest of the class but offer him/her extra time to relieve pressure involved with writing and feedback. Alternate written tests and oral quizzes. On written tests, break up format with multiple choice, true and false, and matching items.

... Involve student in note taking describing his/her surroundings including:

a. physical attributes
b. functional attributes of objects
c. personal reactions to and association with it

... Re-teach information as often and in as varied a manner as possible.

... Provide visual reinforcement as often as possible: demonstrate rather than simply explaining. On the board, use an outline or diagram or give each student a chart to reinforce instruction.

... Show the student(s) a picture or model relevant to the content area being taught. Let it be examined for one minute – then remove it and ask questions about it.

... Make assignment sheets simple and use work sheets with clear, legible printing and broad spacing. Break up large written amounts with double spacing and indentations. Use pictures, diagrams, or charts whenever possible.

... Ask questions continually throughout the presentation. Ask student to repeat assignments privately, prior to beginning work.

... Assign several students to view film-strip tape presentation. Give them written outline to follow and require them to summarize assignments on tape for the class.

... Point out comparisons and contrasts and ask simple direct questions. Break down abstract concepts with concrete objects and relate them to the student's experience if possible.

... Assign a television show related to content area or assignments. Require full descriptions, use of adjectives and adverbs. Have him/her tell all s/he can about a picture or object and have him/her use as many descriptive words as possible.

INABILITY TO ORGANIZE AND REFINE INFORMATION [cont'd]

... Include manipulative materials such as geometric models, calculators, computational devices, colored charts, cards or diagrams, and games and puzzles. Pair concrete and less abstract concepts and eventually lean less on the concrete as abstract concepts are understood and mastered.

... Consider teaching the student as you would a child who is blind. Think of a technique that would relate the concept. How would the student prove mastery of the concept if s/he were sightless?

... Consider teaching the student as you would a child who is deaf. Think of a technique that would get the concept over. How would the student prove mastery of the concept if s/he were deaf?

... Consider teaching the student as you would a child who does not speak English. Think of a technique that would relate the concept.

... Give a student responsibility for taping important lectures or presentations. You can edit the tape and allow the students time to relisten or check notes.

... Use memory games to help bring home important dates or items like playing Concentration with History dates or Scientific formulas. Involve the entire class.

... Have the student read books pertaining to the subject matter on a simplified reading level.

... Reduce the number of pages, examples, and/or questions to be answered on a worksheet, workbook, or text.

... Allow the student to seek help from others.

... Point out similarities and differences in new material.

... Help organize concepts that are presented in texts and break them down.

... Provide review.

INABILITY TO FOLLOW DIRECTIONS

... Provide visual reinforcement as often as possible and demonstrate rather than simply explain. On the board, use an outline or diagram or give each student a chart to reinforce instruction.

... Utilize a student contract. Spell out what the student is to accomplish to meet requirements for credit. Include grade specification.

... Break long assignments into shorter parts.

... Make assignment sheets simple and use worksheets with clear, legible printing and broad spacing. Break up large written amounts with double spacing and indentations. Use pictures, diagrams, or charts whenever possible.

... Ask questions continually throughout the presentation. Ask student to repeat assignments privately prior to beginning work.

... Utilize points for each task done correctly. For example, in an English assignment, give one point for copying the sentence, one for the process required, e.g. punctuation, capitalization, parts of speech, one for appropriate spacing, etc. Utilize same system for math and science.

... In small spelling pad or notebook write the date, classwork or homework to be done. Obtain parental support. Have child take booklet and assignments home weekly. Parents must have completed assignments and future assignments. Help him/her develop ways of finding necessary papers and equipment such as having a manila envelope for homework, a special section in his/her notebook for assignments, etc.

... Oral directions should be clear, slowly stated, and given in small sequence.

... If necessary, give student a tape so that the directions can be followed at student's own rate.

... Allow student to seek help from others.

... Provide printed directions to accompany oral directions and vice versa.

INABILITY TO COMPREHEND WRITTEN MATERIAL

... Allow student to take written examination with the rest of the class but offer him/her extra time to relieve pressure involved with writing and feedback. Alternate written tests and oral quizzes. On written tests, break up format with multiple choice, true and false, and matching items.

... Involve student in note taking describing his/her surroundings including:

a. physical attributes of objects
b. functional attributes of objects
c. personal reaction to and association with it

... Offer alternative assignments for one or two students while continuing on in the regular manner of instruction with the group.

... Utilize the following activities rather than routine assignments:

a. classroom demonstrations
b. present a play
c. role play
d. tape the report or investigation
e. produce a lesson for other students
f. give oral reports

... Show the student(s) a picture or model relevant to the concept area being taught. Let it be examined for one minute – then remove it and ask questions about it.

... Allow tests to be taped, dictated to another person, or given orally so that only content understanding is measured.

... Make assignment sheets simple and use worksheets with clear, legible printing and broad spacing. Break up large written amounts with double spacing and indentations. Use pictures, diagrams, or charts whenever possible.

... Assign several students to view film-strip tape presentation. Give them written outline to follow and require them to summarize assignments on tape for the class.

... Assign a television show tied in to content area or assignments. Require full descriptions, use of adjectives and adverbs. Have him/her tell all s/he can about a picture or object and have him/her use as many descriptive words as possible.

... Include manipulative materials such as geometric models, calculators, computational devices, colored charts, cards or diagrams, and games and puzzles. Pair concrete and less abstract concepts and eventually lean less on the concrete as abstract concepts are understood and mastered.

... Consider teaching the student as you would a child who is blind. Think of a technique that would relate the concept. How would the student prove mastery of the concept if s/he were sightless?

... Give a student responsibility for taping important lectures or presentations. You can edit the tape and allow the students time to relisten or check notes.

... Use audio-visual materials (films, filmstrips, records, tape recorder, etc.) that directly relate to the concepts you are trying to teach.

... Have the student read books pertaining to the subject matter on a simplified reading level.

... Reduce the amount of required reading by selecting key passages for the student.

... Investigate "remedial reading" programs for the student.

..., The student should be encouraged to attend lectures and visit institutions which would be related to the topic of study.

... Reduce the number of pages, examples, and/or questions to be answered on a worksheet, workbook, or text.

... Encourage student to use a marker or finger when reading.

... Allow the student to sit where s/he can comfortably see the board.

... Provide printed directions to accompany oral directions and vice versa.

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PRE-REFERRAL PERIOD

PRIOR TO REFERRAL:

. . . ALL EFFORTS MUST BE MADE TO MEET THE CHILD'S NEEDS IN THE REGULAR EDUCATION PROGRAM

. . . SUCH EFFORTS SHALL BE DOCUMENTED

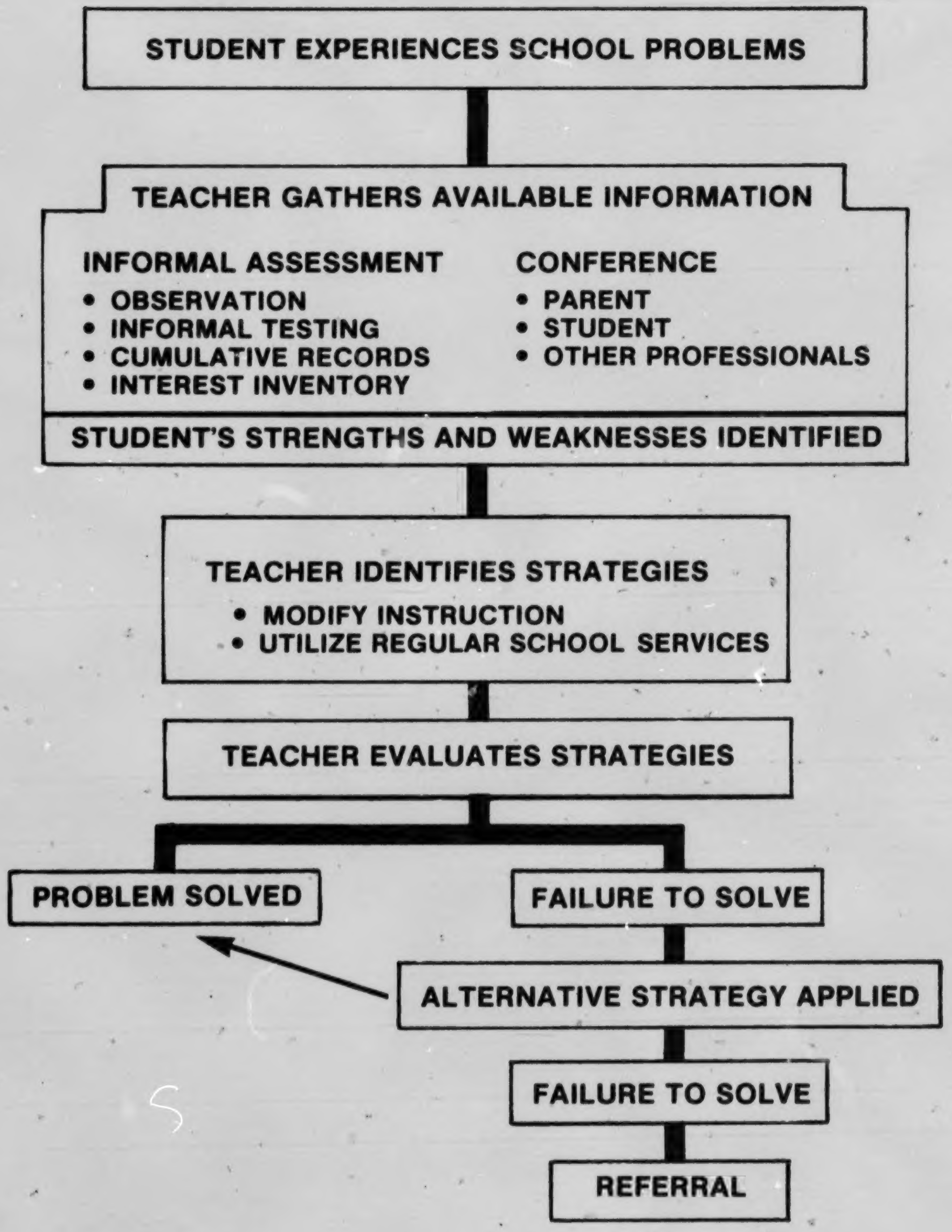
. . . RESULTS MAINTAINED IN STUDENT'S RECORD

SECTION 314.0
CHAPTER 766

115

2.2

PRE-REFERRAL PERIOD: IN SCHOOL SOLUTIONS



STUDENT EXPERIENCES SCHOOL PROBLEMS

TEACHER GATHERS AVAILABLE INFORMATION

INFORMAL ASSESSMENT
- OBSERVATION
- INFORMAL TESTING
- CUMULATIVE RECORDS
- INTEREST INVENTORY

CONFERENCE
- PARENT
- STUDENT
- OTHER PROFESSIONALS

STUDENT'S STRENGTHS AND WEAKNESSES IDENTIFIED

TEACHER IDENTIFIES STRATEGIES
- MODIFY INSTRUCTION
- UTILIZE REGULAR SCHOOL SERVICES

TEACHER EVALUATES STRATEGIES

PROBLEM SOLVED

FAILURE TO SOLVE

ALTERNATIVE STRATEGY APPLIED

FAILURE TO SOLVE

REFERRAL

LEARNING STYLE

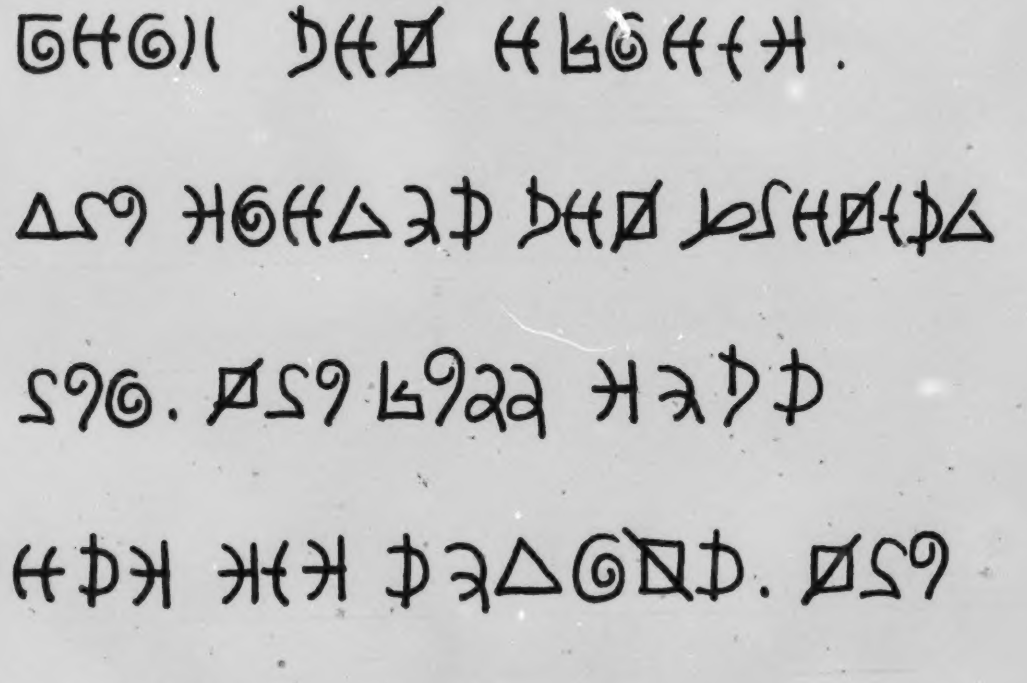
HOW THE STUDENT . . .

- RECEIVES INFORMATION
- PROCESSES INFORMATION
- RETAINS INFORMATION
- EXPRESSES INFORMATION
- MANAGES TASKS

CONDITIONS UNDER WHICH THE STUDENT LEARNS

RATE OF LEARNING

READING TEST



2.9

SOCIO-CULTURAL FACTORS THAT AFFECT LEARNING

1. LANGUAGE BACKGROUND OF FAMILY
2. ATTITUDES, INTERESTS, VALUES, SELF-IMAGE
3. PARENTAL DEMANDS ON THE SCHOOL AND THE STUDENT
4. TEMPORARY FAMILY CRISIS OR PROBLEM HISTORY
5. SOCIO-ECONOMIC DIFFERENCES
6. PEER PRESSURES

FACTORS IN SCHOOL SYSTEMS THAT AFFECT LEARNING

1. ADMINISTRATIVE ORGANIZATION OF THE SCHOOL
    - A. DEMOCRATIC
    - B. AUTHORITARIAN

2. SCHOOL BUDGET
    - A. AMOUNT
    - B. CONTROL

3. PHYSICAL PLANT
    - A. AGE
    - B. ATTRACTIVENESS
    - C. COMFORT LEVEL

4. QUALITY OF INSTRUCTION
    - A. STAFF DEVELOPMENT PROGRAMS
    - B. TEACHER EXPERTISE (DEGREE LEVEL, YEARS OF EXPERIENCE)
    - C. RECOGNITION OF STUDENT INDIVIDUALITY
    - D. SCHEDULING (OPEN, TRACKING)
    - E. EDUCATIONAL ALTERNATIVES

5. COMMUNICATION
    - A. FORMAL, RESTRICTIVE
    - B. INFORMAL, FREE-FLOWING

6. TEACHER AND COMMUNITY ATTITUDES
    - A. STUDENT ADVOCACY
    - B. EXTRA-CURRICULAR ACTIVITIES

ACTIVITY FOUR: GOOD TEACHING PRACTICES

In this activity, you will be asked to prepare an outline on how you would teach a particular skill.

INSTRUCTIONS

1. Choose a group recorder.
2. Individually read over the article, "Good Teaching Practices," found on pages 38-40 of this manual.
3. As a group choose a skill that you would teach to a class or a group of students.
4. Prepare an outline of a lesson which includes the major steps that you would take to teach this lesson.
5. Your outline should reflect the three stages of skill development as outlined in the article. Remember to make your lesson provide for a wide range of learning styles, (record your outline on newsprint).
6. You have 30 minutes to complete this exercise as outlined above.
7. At the end of 30 minutes, the trainer of this session will ask the group recorder to present your outline to the class. The recorder will be given five minutes to describe the lesson.

GOOD TEACHING PRACTICES

Many teachers today continue to search for the "perfect" textbook of instructional materials while many faculty committees labor over devising all-inclusive curriculum objectives for any situation. While this search and labor goes on, publishing companies pour out endless streams of materials and texts, each one promising to fulfill the goal of enabling the teacher to reach and teach all students in the classroom. Effective teaching, it is hoped, will come about by clearly delineating every curriculum content area into sub-objective tasks or by purchasing newer and more up-to-date materials. What is rarely examined is the list of good teaching principles which were introduced in sophomore Educational Psychology classes and never referred to again. Included in this list were concepts such as motivational techniques, direct instruction, reinforcing appropriate behaviors, sequencing tasks (easy to hard) and, overall, relating to students in a positive, effective way. (Volkmor and Pasanella, 1977).

Citing a study done in Salt Lake City, Utah, Volkmor and Pasanella (1977) list the following techniques exhibited by effective teachers:

1. Deviation from prescribed materials, e.g., basal textbooks, teacher's guides, etc.
2. More time spent in direct instruction.
3. Use of rewards such as social, praise, and/or reward systems such as contingency management.
4. Eliciting oral responses from students whereby all children in a group respond in unison to every teacher stimulus, increased retention, comprehension, and reading accuracy.
5. Movement from prompted to unprompted learning as s/he taught.
6. Teaching parents to teach their children.
7. Expecting high levels of mastery with rate as a criterion. The more effective teacher was more concerned with mastery of materials than with "covering" a predetermined amount of material. More time was spent on drill and review to insure mastery.

The authors further noted that effective teachers used great care in determining what methods and procedures would best help a child's progress through the three stages of concept/skill acquisition outlined by Lowenbraum and Affleck (1976):

1. Initial acquisition - the student receives information on how to perform the behavior, gains some knowledge about the behavior and minimal skill usage.
2. Proficiency stage - the student improves his accuracy and rate of performance.
3. Maintenance stage - the student reaches the level of proficiency desired in order to maintain the skill.

Lowenbraum and Affleck (1976) include the following guidelines for teaching skills at the level of initial acquisition:

1. Teach the student how to perform the skill:
    a. Be sure the child is attentive
    b. Actively include the child in instruction
    c. Use visual stimuli in addition to verbal instruction
    d. Use consistent, simple vocabulary
    e. Present information in a logical, organized fashion (perform Task Analysis)
    f. Demonstrate the desired behavior
2. Provide supervised practice of the new skill:
    a. Provide prompts or partial prompts when needed
    b. Provide physical guidance when needed and appropriate
    c. Fade out use of cues and prompts
    d. Provide corrective feedback on performance

When the child has an understanding of the task and how to perform it, opportunities for practice must be given to increase proficiency. Lowenbraum and Affleck (1976) list the following guidelines for independent activities:

1. Insure independence of task completion:
    a. Use simple directions
    b. Use one task per page or assignment
    c. Use standard formats that the child can recognize
    d. Insure that the child knows the exact demands of the task and when s/he has completed the task
    e. Use responses that can later be corrected by the teacher

2. Insure success on the child-directed tasks:
    a. Use visual prompts
    b. Use verbal prompts
3. Provide feedback on responses made

Volkmor and Pasanella (1977) present a summary of the match between the three skill stages outlined above and the methods and procedures appropriate to each stage:

STAGE	METHOD/PROCEDURE
INITIAL ACQUISITION	--TEACHER-DIRECTED ACTIVITIES: ...MOLDING GUIDED PARTICIPATION ...DEMONSTRATION AND LIMITATIONS ...PROVIDE MODELS IN A MATCH TO SAMPLE TASK ...PROVIDE PROMPTS AND FADE-OUT ...CONSTANT CORRECTIVE FEEDBACK
PROFICIENCY	--INDEPENDENT CHILD ACTIVITIES: ...PLAN AND PREPARE INDEPENDENT ACTIVITIES ...DRILL SHEETS ...SELF-CORRECTING ACTIVITIES ...DELAYED TEACHER FEEDBACK ...PEER TUTORING AND PRACTICE
MAINTENANCE	--INDEPENDENT CHILD ACTIVITIES: ...PROVIDE MIXED PRACTICE ...INTRODUCE SKILL IN CONTEXT OF OTHER PROBLEMS AND SUBJECT AREAS ...TEACH TO DISCRIMINATE OPERATIONS e.g. =, +, X, -, etc.

Most importantly, consider the student's individual learning style (see Section II) when teaching.

CONTINUOUS OR ANECDOTAL RECORDING

DATE: 3 December 1977

CHILD: John Doe

OCCURENCE:

Class was working on individual essays. John turned to the boy behind him and accused him of pushing his desk into John's back. Boy denied. John stood and shoved his desk at boy. Threw all books and papers off both desks. Had to be pulled off boy by other students.

WHEN: Following Social Studies essay assignments.

DESCRIPTIVE VS. INTERPRETATIVE STATEMENTS

DESCRIPTIVE STATEMENTS

OBJECTIVE RECORDING OF THAT WHICH IS SEEN AND/OR HEARD CONCERNING A SPECIFIC EVENT

THE BOY THREW UP HIS HANDS AND SHOUTED, "I HATE SCHOOL".

INTERPRETATIVE STATEMENTS

SUBJECTIVE RECORDING OF THAT WHICH IS SEEN AND/OR HEARD CONCERNING A SPECIFIC EVENT

THE BOY WAS **ANGRY.**

DEBBIE MISSED **MANY** OF HER CLASSES.

HE IS A **HYPERACTIVE** BOY.

2.12

FREQUENCY COUNTING

STUDENT Jane

SETTING Rm. 209 Algebra Class **TIME** 10:00 - 10:40

BEHAVIOR Talking out in class

DATE: 2/9/79 𝍸 |
2/10/79 𝍸
2/11/79 𝍸 ||

ACTIVITY SEVEN: USING DESCRIPTIVE LANGUAGE

Work in pairs to complete the worksheet below. You have 10 minutes to complete this task.

INSTRUCTIONS

I. Decide whether these statements are descriptive (D) or interpretive (I).

A. ____ David has a short attention span.

B. ____ Tanya had many temper tantrums yesterday.

C. ____ Jeffrey pushed his brother to the ground and started to shout, "Don't use my baseball glove again."

D. ____ Lorin hates summer camp.

E. ____ Alice signed out to the girls' bathroom five times in 45 minutes.

II. Select two interpretive statements from the list above and rewrite them using descriptive language.

SIX AREAS OF EDUCATIONAL ASSESSMENT

1. SOCIAL/BEHAVIORAL/EMOTIONAL ADJUSTMENT
2. PHYSICAL APPEARANCE
   GROSS MOTOR ABILITY
3. PERCEPTUAL-MOTOR SKILLS
4. VERBAL COMMUNICATION
5. WRITTEN COMMUNICATION
6. CONTENT AREA SUBJECTS

SOCIAL/BEHAVIORAL/EMOTIONAL ADJUSTMENT

- What is the educational setting of the student? Number of other students? Student/teacher/aide ratio?

- What is the general routine of the student throughout the day?
- Are problems noted especially during some part of that routine?
- What part of the routine goes best?

- What is the quality of the student's social/behavioral/emotional adjustment? What is the student's attendance record? What is the student's general relationship with peers? Which peers does the student interact with best? Worst? Are relationships stable? Do they vary? Same age, older or younger? What sort of things does the student say about peers? What sort of things do peers say about the student?

- How does the student relate to others? With teachers and other school professionals? Adults outside of school? Employer? Members of outside agencies? What is the student's relationship with parents? Other members of the family? What does the student report about these relationships? What do family members report about their feelings toward the student?

- How does the student express independence? What would be representative instances? How are these expressions indicative of emotional/behavioral/social growth? How do they interfere? In what areas is the student self-reliant? What does the student do to show self-reliance?

- In what ways does the student demonstrate responsibility? Towards self? Others? How does such responsbility enhance/interfere with social/behavioral/emotional development? In what ways does the student take a leadership role? How do these activities indicate social/behavioral/emotional growth?

- How does the student demonstrate intiative? What kinds of things is the student highly motivated to do? How has the student shown this? Is it constructive? Destructive?

- How does the student exhibit self-control? What are the areas of the greatest self-control? When do efforts at self-control appear to break down? What happens? How does the student request help in self-control? Student asks for help? Provokes incidents so someone else will help? How is it done? Is it appropriate?

- How does the student indicate level of self-esteem? Physical appearance/grooming? Quality, promptness, detail of work? Out-of-school projects? Verbal remarks about self/others? Self-deprecating? Overly boastful? Is self-esteem consistent with ability? How?

- How does the student characterisitically react to pressure? Under what circumstances does the student appear to react best to pressure? Least to pressure? What does the student do? How appropriate are the student's reactions to situations? Does the student have any nervous habits? What are they? When do they seem most evident? How does the student feel about the habit? How do others feel about it?

- What is the general level of social/behavioral/emotional maturity of the student's immediate peer group? In what areas is the student ahead of his peers? Behind? How is this demonstrated?

- In general, how would you characterize the student's social/behavioral/emotional development in the classroom?

PHYSICAL APPEARANCE/GROSS MOTOR ABILITIES

- What obvious physical handicap(s) does the student have? What effect does it have on the student's ability to learn? How does the student compensate? Is the compensation appropriate? Does it interfere with learning? How? What athletic abilities does the student have? How are they used? Are they age-appropriate? Ahead? Behind? What is the level of physical coordination? Any area problems? How are they demonstrated?

- What is the student's general appearance? How is posture in relation to others of the same age? What is the condition of skin, hair, clothing? Any matter observed in eyes, ears, nose? When? How often? Any offensive body odors? Is there any evidence of general hygenic problems?

- What is the general health of the student? Any chronic problems? Acute instances? What were they? What happened?

PERCEPTUAL/MOTOR SKILLS

- Does the student see distant objects well? Those near? Any unusual position of head/eyes when student is engaged in visual tasks? Describe. How is the student's visual memory? For words? For sentences? For numbers? For pictures? What evidence is there that the student may "see" materials in a distorted manner?

- What is the status of handwriting? Manuscript? Cursive? Larger/smaller than expected? Regular/irregular formation? Reversals? Rotations? Of letters? Of numbers? Words? Any differences in the reproduction of pictures, letters, words, numbers, sentences? What differences are noted in copying and reproducing from memory? Are there any circumstances of marked changes in handwriting ability - stress, subject area, time of day, day of week?

- How does the student use school materials/equipment? What materials are used especially well/poorly? Any special circumstances? Materials/equipment used differently than normally used? To what effect?

- How would you describe the student's work? General form appropriate? Hastily done? Too much care? What samples of the student's work have been collected to provide illustrative documentation?

VERBAL COMMUNICATION

- What evidence is there that the student has difficulty with sounds? Hearing them from a distance? Discriminating different environmental sounds (school bell, fire engine, telephone), musical sounds (tone, pitch), phonetic sounds (short "e" from short "i")? How long can the student attend to verbal information? In quiet/noisy environment? How long is verbal information retained? Directions for activities? Dictation of words, sentences, numbers? Any differences? Any unusual posturing of the head toward/away from the sound? What? When?

- What is the quality of the student's verbal information? Are there marked differences between verbal expressions and written? Above/below what might be expected? How noted? Is the student bi-lingual? What differences are there in the quality of the two languages?

- How does the student prefer to express what is being learned? Through writing? Speaking? Drawing? Constructing models? Gesturing? Signing? Finger spelling?

- Does the student seem to relate better to material that has been heard such as lecture, radio, television, conversations with teacher, peers, than to material read such as books, magazines, pictures, displays, models, diagrams, blueprints? How was this noted? When?

WRITTEN COMMUNICATIONS

- What is the current level of spelling ability? What are the most difficult words that the student can spell? What kinds of errors are made (vowel sounds, consonant blends, "f" for "ph", etc.)? Do errors increase, decrease with pressure, length of time at task, type of task, formality/informality of setting?

- How long does the student retain what was read? How well are details (important/relevant) retained? Is the sequence of the content retained? Any differences between subject areas (formal reading instruction, leisure reading, social studies, science, mathematics, shop, art, etc.).

- How well does the student follow written instructions? When using: textbook, workbook, chalkboard, handouts, tests and examination, construction of models, laboratory experiments, instructions on machinery or in manuals, i.e. automotive? Any differences between manuscript and cursive writing? What?

- What is the quality of the student's written self-expression? What are the differences between verbal and written skills? Is the quality of writing affected by subject area (creative writing, reports, social studies, science, English), themes, (self, machine, animals), or concrete vs. abstract topics? Describe. Is the work original, gained from student's experiences, single source, many sources? Appear to be written to please self, teacher, peers, parents?

SPECIFIC CONTENT AREA(S)

- What content area(s) are you responsible for? What is the student's general level of achievement? What are the things the student does well? What specific errors does the student make? Which errors indicate lack of prior knowledge/ability, and/or basic skills? Which errors are made in relation to the current instructional material for which you are responsible. What samples of student's work have you included that demonstrates this?

- How does the student respond to tests? Any difference between performance on the following: Informal quizzes? Announced/unannounced? Take-home? "Final" examinations? Standardized formal tests? Written vs. oral testing? Drawing? Model building? Photography? Audio-tapes? Transparencies? Which is best to assess the student's learning? Why?

- How does the student respond to evaluation? Oral? Written? Formal reports? Informal? Who is the best person to give evaluative information to the student? Classroom teacher? Guidance Counselor? Principal, etc.?

- Does the student have the necessary study skills to complete assigned work? What problem areas have been detected? How well does the student follow directios? Does the student adequately plan time to complete work? What kinds of things can the student do independently? When is help needed? Describe the quality of notes that the student takes? What might help the student: outlines, using notes of a classmate, or teacher-prepared notes? Is the student able to memorize materials for subject areas when necessary? What aids can be used in lieu of memorization? Notebook of formulas? Memorization "tricks"? Access to reference materials? Access to own notes?

- How well is the student able to integrate materials learned in one unit with other units in the subject areas? With other subject areas? What aids have to be given: none, verbal reminders, teacher notes, specific instruction?

- To what degree does the student "go beyond" the materials presented? Asks for outside work; brings examples into class voluntarily; selects more challenging materials? Expands use of reference materials? Does the student ask for further explanation from: teacher, peers, other teachers, or professionals in the building? Who? Does the student ask for simpler material to use independently? How extensively do other students utilize their own parents to explain materials covered in class? Does the student's family situation put him/her at an advantage/disadvantage in this respect?

- What are your education objectives for the student? Which ones have you tried to help the student meet, but were unable to? Which strategies did you devise to help utilize the strengths of the student in meeting these educational objectives? What happened? What strategies have you used to minimize the student's weaknesses? What happened?

- Has this student every been formally tested? What were the findings? What formal assessments have been given to the student? When? What were the findings? Did the results of any of the assessments indicate a need for change in the student's school program? Were any changes made? What happened?

GRADED WORD LISTS

1. Select 10 words from each grade level reader. Clearly print or type these words on an index card.

2. Select a card two years below the student's grade level and have the student read the words aloud. If a word is misread, the teacher should present an easier list until the student makes no errors. The student should be encouraged to attempt to read all the presented words. The teacher should record all responses so that the student's errors can be analyzed to determine his/her method of work attack.

3. The student should continue reading the words on the grade level until s/he misses three words. Stop the test.

4. The student's reading level can now be determined.

   (a) Independent Reading Level = 9 out of 10 words
   (b) Instructional Reading Level = 8 out of 10 words
   (c) Frustration Reading Level = 7 out of 10 words

   Three or more errors indicate that the reading materials are too difficult for the student.

PARAGRAPH READING TEST

1. SELECT A PARAGRAPH FROM THE STUDENT'S TEXT

2. CONSTRUCT FOUR COMPREHENSIVE QUESTIONS

   ASK THE STUDENT TO:

   A. DEFINE A KEY WORD IN THE PARAGRAPH
   B. RECALL A SPECIFIC IDEA
   C. RECALL A MAIN IDEA
   D. MAKE AN INFERENCE

TASK ANALYSIS IS A PROCESS OF . . .

- ISOLATING
- DESCRIBING
- SEQUENCING

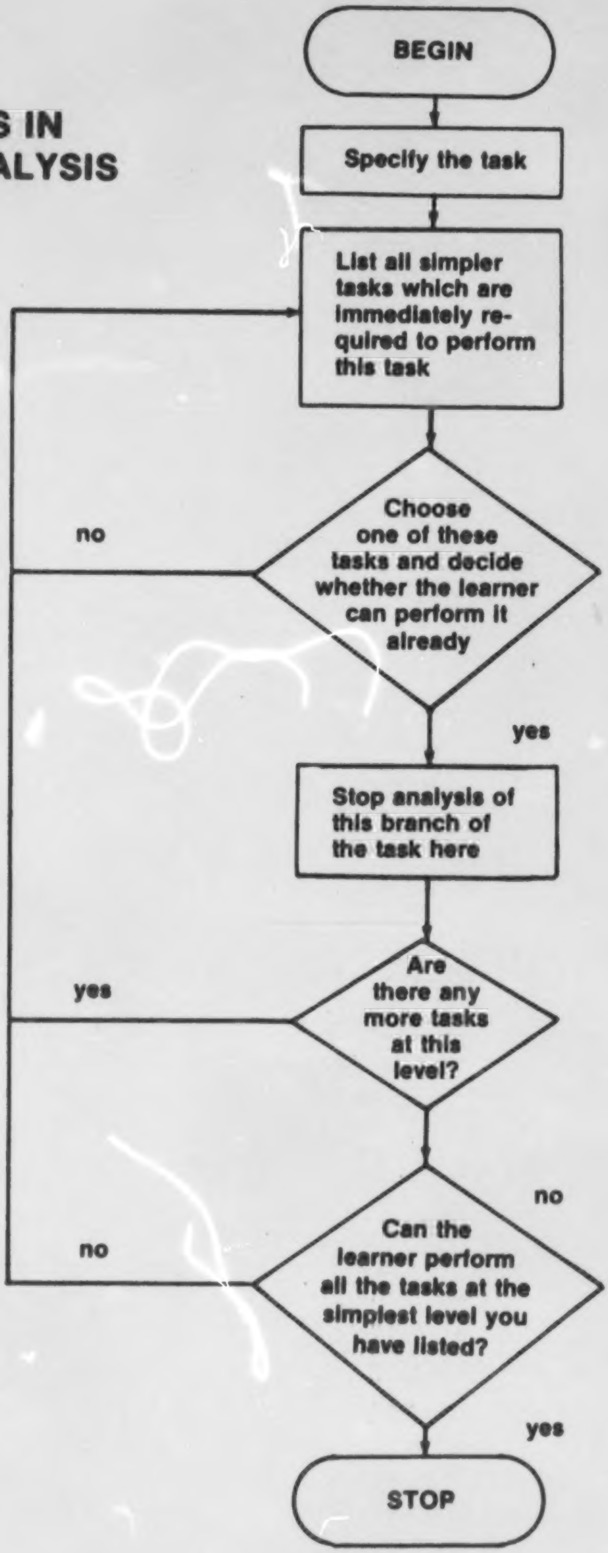
ALL NECESSARY SUBTASKS

TASK ANALYSIS CAN BE USED FOR . . .

- INSTRUCTION
- DIAGNOSIS
- EVALUATION

2.17

STEPS IN TASK ANALYSIS

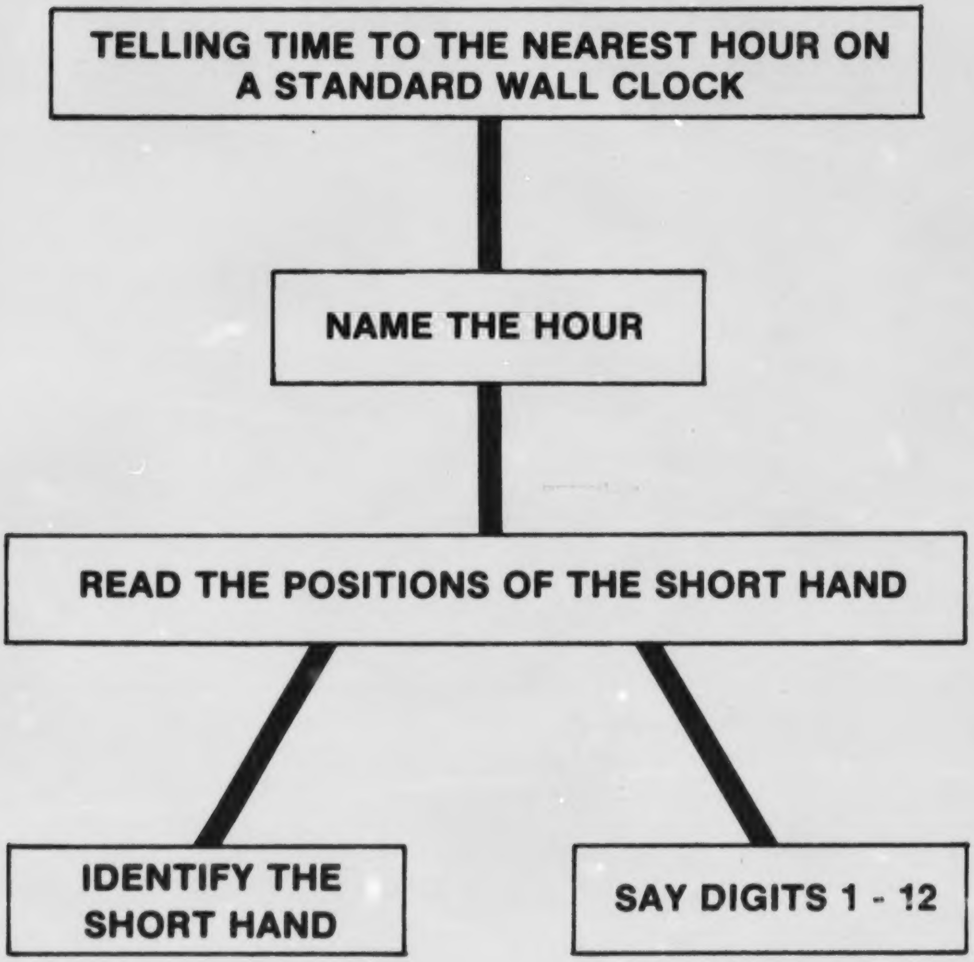

BEGIN
Specify the task
List all simpler tasks which are immediately required to perform this task
Choose one of these tasks and decide whether the learner can perform it already
no
yes
Stop analysis of this branch of the task here
Are there any more tasks at this level?
yes
no
Can the learner perform all the tasks at the simplest level you have listed?
no
yes
STOP

BASIC STEPS IN TASK ANALYSIS

1. SPECIFY THE MAIN TASK.
2. IDENTIFY SUBTASKS AT THE NEXT EASIEST LEVEL.
3. TREAT EACH SUBTASK AS A MAIN TASK. REPEAT PROCEDURE.
4. STOP THE ANALYSIS WHEN A SUBTASK REACHES PUPIL'S ENTRY LEVEL.

2.19

TASK ANALYSIS: TELLING TIME


TELLING TIME TO THE NEAREST HOUR ON A STANDARD WALL CLOCK
NAME THE HOUR
READ THE POSITIONS OF THE SHORT HAND
IDENTIFY THE SHORT HAND
SAY DIGITS 1 - 12

STRUCTURING A LEARNING SEQUENCE

LEARNING SEQUENCE:

SHOWS THE ORDER IN WHICH YOUR LEARNERS SHOULD PROCEED THROUGH THE LIST OF SUBTASKS UNTIL THEY CAN PERFORM THE MAIN TASKS.

TO ESTABLISH A LEARNING SEQUENCE:

1. PROCEED FROM THE **EASIEST** TO THE **HARDEST TASK.**
2. AT ANY GIVEN LEVEL OF DIFFICULTY, **BEGIN** WITH THE SUBTASK THAT WILL BE **MOST FREQUENTLY USED**.

CRITERIA FOR TASK ANALYSIS:

1. **RELEVANCE**
2. **COMPLETENESS**
3. **TRIVIALITY**
4. **NECESSITY**
5. **REDUNDANCY**

ACTIVITY EIGHT: CRITERIA FOR TASK ANALYSIS

Use the following criteria for judging the adequacy of each task analysis presented below. Use the numbers to represent each criteria.

(1) Observable behavior and stated conditions. Is the main task and each sub-task observable? Is there an action verb? Are the conditions for presenting the task present?

(2) Relevance. Is the main task relevant to the effective performance or relevant to the task in a real-world classroom with special needs children? This can be a matter of opinion or substantiated by research.

(3) Completeness. Are enough sub-tasks listed to cover the performance of the main task? Has any essential sub-task been omitted?

(4) Triviality. Is any sub-task included which is simpler than the entry level of the target audience?

(5) Necessity.. Is each sub-task necessary for the performance of the main task? Are any of the sub-tasks unnecessary?

(6) Redundancy. Is any sub-task repeated more than once with or without minor changes in wording? Is any set of sub-tasks an alternate for the performance contained in another set of sub-tasks?

(1) Main Task: Given a pocket calculator, the student will divide 25X5.

Sub-task 1: Turn on the calculator by pushing the "ON" button.

Sub-task 2. Touch the numerals 2 and 5 in that order.

Sub-task 3: Touch the numeral 5.

Sub-task 4: Touch the equal sign.

Sub-task 5: Read the answer.

(2) Main Task: Given the liquid paints red and yellow, the student will mix them to obtain orange.

Sub-task 1: The student will name the colors in the rainbow in order; red, orange, green, blue, indigo, violet.

Sub-task 2: The student will shake the bottles of red and orange paints.

Sub-task 3: The student will select an empty bottle for mixing the paint.

Sub-task 4: The student will measure in a measuring cup ½ cup each of red and yellow paint.

Sub-task 5: The student will pour the red and yellow paints into the empty jar.

Sub-task 6: The student will mix by stirring the red and yellow paint.

(3) Main Task: Given the numerals 8 + 2 in column form $\begin{array}{r}8\\+2\\\hline\end{array}$, the student will write in the correct response.

Sub-task 1: Addition of the numerals 8 + 2 in column form.

Sub-task 2: Write in the answer.

Sub-task 3: Name the sum by ______________.

Sub-task 4: Read the = sign.

Sub-task 5: Read the + sign.

Sub-task 6: Read the numerals 8 and 2.

Sub-task 7: Match the eight with 8 objects.

Sub-task 8: Match the two with 2 objects.

(4) Main Task: Given visually words at, cat, sit, rot, the student will identify words with the short vowel sound "A".

Sub-task 1: Read the words at, cat, sit, rot.

Sub-task 2: Identify the words with the short vowel sound "A".

(5) (This main task is a sub-task to writing the manuscript letter "M").

Main Task: Given a diamond on a 3x5 card, the student will copy the diamond correctly (points intersecting, approximate size, straight not wavy lines)

Sub-task 1: Examine the diamond on the card.

Sub-task 2: Pick up the pencil.

Sub-task 3: Draw four sides of the diamond.

(6) Main Task: Given a pocket calculator, the student will add 25 + 34.

Sub-task 1: Push the "ON" button.

Sub-task 2: Touch 2 followed by 5.

Sub-task 3: Touch 3 followed by 4.

Sub-task 4: Touch the add sign.

Sub-task 5: Add the sums.

Sub-task 6: Touch the equal sign.

Sub-task 7: Read the answer.

ACTIVITY NINE: PERFORMING A TASK ANALYSIS

INSTRUCTIONS:

In this activity, main tasks are presented. Read these main tasks and provide sub-tasks for each main task.

(1) Main task: Given an open zipper attached to a square of cotton material the student will close the zipper.

(2) Given two containers and ten wooden blocks, the student will put 5 blocks in each container.

(3) Given the partial sentence, "I like ...". the student will select from the pictures or cards of an ice cream cone, a baseball bat, a dog, a cat, a circus, a horse, a picture to place after "I like...".

(4) Given a small pot filled with dirt, a flower seed, and a water can the student will "plant" the seed.

(5) Main task: Given on paper the partial sentence, "We ran..." and the two words road and home, the student will circle the word that makes sense in the sentence.

2.21

INDICATORS OF ACADEMIC PROBLEMS

STUDENT'S INABILITY TO:

- . . . COMPREHEND WRITTEN MATERIAL
- . . . COMPLETE ASSIGNMENTS
- . . . FOLLOW DIRECTIONS
- . . . PRODUCE LEGIBLE WORK
- . . . WORK ON GROUP LEVEL
- . . . PARTICIPATE/UNDERSTAND ORAL DISCUSSIONS AT THE GROUP LEVEL
- . . . ORGANIZE AND REFINE INFORMATION

2.22

INDICATORS OF SOCIO-EMOTIONAL PROBLEMS

EPISODES OF:

. . . VIOLENCE

. . . AGGRESSION

. . . INATTENTION

. . . FRUSTRATION

. . . DISREGARD FOR RULES AND REGULATIONS

. . . ATTENTION-GETTING BEHAVIORS
(TALKING OUT, OUT OF SEAT, NOISY)

. . . IMPULSIVITY OR LOSS OF CONTROL

. . . WITHDRAWAL

2.23

IN SCHOOL SOLUTIONS:

UTILIZATION OF REGULAR SCHOOL SERVICES

I. CUMULATIVE RECORDS

II. ROUTINE VISION AND HEARING SCREENING

III. SUPPORT PROGRAMS

- A. TITLE I
- B. REMEDIAL READING
- C. SCHOOL VOLUNTEERS/COLLEGE INTERNS

IV. SCHOOL PROFESSIONALS

- A. GUIDANCE COUNSELORS
- B. PUPIL ADJUSTMENT COUNSELORS
- C. SCHOOL PSYCHOLOGISTS
- D. SPECIAL SUBJECT TEACHERS
    1. Music
    2. Art
    3. Vocational
    4. Physical Education
    5. Home Economics

ACTIVITY TEN: PRE-REFERRAL DOCUMENTATION

In this activity, you will be asked to summarize a student's strengths and weaknesses, suggest changes in the regular school programs, and devise a system of documentation to record your efforts to meet the student's needs within the regular classroom setting.

Instructions

1. Select a group spokesman.
2. Individually read over the case materials on Sam (pages 64 + 65)
3. Complete the worksheet on pages 66-68.
4. You will have 60 minutes to complete this activity.

SAM

Sam, a tall, husky fourteen year old who has "good" and "bad" days spends several afternoons a week in the principal's office or waiting for a guidance counselor. He can be charming or disruptive but usually gives the impression of needing to control his classes. A regular participant in non-core academic areas such as Industrial Arts and Physical Education, he is a willing and cooperative student and is seen as responsible and helpful by these teachers. He has been assigned punishment detentions on a regular basis from courses including Science, English, History, and Government. His last group I.Q. indicated a borderline "normal" ability.

Notes from his teachers indicate illegible handwriting even though he is allowed to print. He appears to have poor organization skills and an inability to take notes or copy information correctly. References from his history read as follows:

Anecdotal Report - English Teacher
22 November 1977

A real smart alec. Sam has done nothing requested of him so far this year. He cannot sit quietly while we read or discuss stories. If we read aloud, Sam refuses although I've assured him he deserves a turn and we don't mind his slow reading. If convinced to read and corrected at all, he gets furious and has to be put out of the room. On a good day, he seems to know what is going on. For example, I read a poem to the class and Sam really participated well in the discussion. Then, when class was told to copy the poem and write a short paragraph about our discussion, he got "wise" and when corrected, refused to work at all. His written work is very careless, and, if he can be convinced to do it over, it still is poorly organized and impossible to read. He has to learn self-control and some manners.

Anecdotal Report - Social Studies Teacher
7 January 1978

Sam entered class with group and conversed prior to bell with friends. After bell and attendance, homework was requested to be handed in. As usual, Sam's was not done. I requested he see me after class as usual. At that point, I turned to board to discuss chart based on time line. While I described events, class copied chart. Each time I turned to chart, someone would make a rude sound and class laughed. Finally I caught Sam doing it. I told him to shape up because even if he couldn't do the work, the rest of the class was working. He kept up a subdued running commentary all through the rest of the discussion. He was sent to the office. He has failed the mid-term exam and his written project was not acceptably done. He is failing at this time.

Anecdotal Report - Science Teacher
20 February 1978

Lab work - works well with partners but received two assignment failures when I discovered one of his partners was writing Sam's notes for the Lab manual. Has a good grasp of what we are doing and at times seems genuinely interested in Science, especially lab work and experiments. Got A+ on his oral presentation but then failed next two tests. When corrected, he tends to "blow up" and create a real disturbance. Cannot pay attention. Sounds smarter than his papers show.

I. Find two judgemental statements that were written about Sam and re-write them using descriptive language.

A. ____

____

____

B. ____

____

____

II. Respond to the following:

A. Describe Sam's strengths.

____

____

____

B. When does Sam experience success? Under what conditions (What was the teacher doing? What was Sam doing? What was the class doing?)

____

____

____

C. Describe Sam's weaknesses?

____

____

____

D. When does Sam experience failure? Under what conditions? What was the teacher doing? What was Sam doing? What was the class doing? . etc.

____

____

III. Briefly describe two methods the teachers could have used to informally assess Sam's problems.

IV. How would you describe the student to his/her parents? Take turns in your group to role play the part of the teacher and parent. Why is it important to consult with parents?

V. Which regular school services would you utilize to seek help for the student? Why?

REGULAR SCHOOL SERVICES	REASON

VI. What change would you make in the regular school program to remedy the problem? Include such information as change in seating arrangements, curriculum materials, scheduling, and teaching strategies. Consult the section on teaching strategies on page   of his manual. Complete the chart on the following page.

PROBLEM	POSSIBLE SOLUTIONS

PROBLEM	POSSIBLE SOLUTIONS

PROBLEM	POSSIBLE SOLUTIONS

VII. The law requires that the classroom teacher document all efforts to meet the student's needs in the pre-referral period. Devise a practical record keeping system for the teacher to use to document all efforts and the results of these efforts.
(Use reverse side for additional writing).

CRITERION TEST — MODULE TWO

FILL IN THE BLANKS

1. Prior to the referral, all efforts must be made to meet the child's needs in ____________________. These efforts shall be ____________________ and the results maintained in the ____________________.

2. Three major factors that affect learning include ____________________, ____________________, and ____________________.

3. A statement of the student's learning style includes ____________________, ____________________, and ____________________.

4. Three indicators of academic problems are ____________________, ____________________, and ____________________

5. List three ways that teachers can systematically record student behavior. ____________________
____
____

6. List two methods/procedures for each stage that teachers should use when teaching new skills.
   a. Initial Acquisition Stage ____________ ____________
   b. Proficiency Stage ____________ ____________
   c. Maintenance Stage ____________ ____________

7. List two methods to informally assess the student's ability to read assigned materials.

____

____

8. Task analysis is the process of ______________________________,

______________________________, and ______________________

______________________________all necessary subtasks.

9. List three steps in task analysis:

____

____

____

10. Regular school services that can be utilized for students in the Pre-Referral Period include:

____________________ ____________________

____________________ ____________________

MODULE THREE

THE INDIVIDUALIZED EDUCATIONAL PLAN: COMPONENTS OF THE IEP

PARTICIPANT'S MANUAL

INTRODUCTION TO MODULE THREE

The purpose of this module is to introduce you to the necessary procedures and components for the development of the Individualized Educational Plan (IEP). An IEP is a working document that includes: 1) a student profile, 2) current performance levels, 3) general student centered goals, 4) teaching approaches and methodologies, 5) specialized equipment and materials, 6) monitoring and evaluation techniques, 7) specific student centered objectives, and 8) special education service delivery systems. The IEP document is considered a product of the participants' decision concerning the student's needs.

OVERVIEW OBJECTIVES

After the completion of this module, you will be able to:

1. Identify the internal consistency of the components of the Individualized Educational Plan as it relates to the decision-making process by completing a written exercise;
2. Identify the components of the student profile by completing a written exercise based on simulated case materials;
3. Critique statements of current levels of performance utilizing a specific set of criteria;
4. Identify current levels of performance from assessment information;
5. List goals in order of priority for a simulated case study;
6. Judge the adequacy of specific student centered objectives by a specific set of criteria;
7. Write specific student centered objectives for each goal presented for a simulated case study;
8. Select from a range of teaching approaches and methodologies appropriate strategies for a simulated case study;
9. Select from a range of on-going monitoring and evaluation techniques those strategies most appropriate for the evaluation of goals, specific objectives and teaching strategies for a special student;
10. Select from a range of special education service delivery systems (including settings) the type of service most appropriate for a special student.

CRITERION TEST — MODULE THREE

PART ONE-COMPLETION

1. List the components of the Individualized Educational Plan (IEP)

   a. ______________________________

   b. ______________________________

   c. ______________________________

   d. ______________________________

   e. ______________________________

   f. ______________________________

   g. ______________________________

2. The components of the student profile are:

   a. ______________________________

   b. ______________________________

3. How a student manages a task is part of the student's ______________
____

4. The current levels of performance state ______________________
____

5. General Student Centered Goals include:

   a. ______________________________

   b. ______________________________

   c. ______________________________

6. Monitoring and evaluating strategies should be ________ and __________.

PART TWO: TRUE OR FALSE

1. ____ The student will increase his vocabulary is an appropriate goal statement.

2. ____ The IEP does not include specific teaching approaches and methodologies.

3. ____ Administering a group standardized test to assess a student's progress is an example of direct assessment.

4. ____ The current level of performance should indicate the student's entry level.

5. ____ How a student processes and retains information is included in the learning style.

6. ____ The statement "The student reads on a 2.0 grade level" is an appropriate statement for a current level of performance.

7. ____ The service delivery plan includes the type of setting.

8. ____ Goals statement should indicate the direction of change.

9. ____ The service delivery plan should be decided upon prior to development of goals and teaching strategies.

PART THREE - MATCHING

___ 1. Physical constraints
___ 2. Entry level
___ 3. Small group/large group/one-to-one
___ 4. Criterion tests
___ 5. Rate of learning
___ 6. Subtasks for goal statements
___ 7. Multisensory approach

a. Included in service delivery plan
b. Part of learning style
c. Specific Student Centered objectives
d. Part of student profile
e. Teaching methodologies
f. Part of current level of performance
g. Can be included in monitoring and evaluation strategies.

COMPONENTS OF THE INDIVIDUALIZED EDUCATIONAL PLAN

By Patricia Gillespie-Silver

Introduction

One of the more salient features of Chapter 766 and PL 94-142 is the Individualized Educational Plan (IEP) provision. In the term IEP, individualized means that the program must be addressed to the needs of one student rather than a group or class of students. Educational means those elements of the student's education related to special education and related services. Plan refers to the statement of what will be provided for the student.

The rules and regulations for Massachusetts 766 explicitly designate what constitutes an IEP. The major components of the Massachusetts IEP includes:

> A statement of the student profile, including learning style, physical constraints, and strengths and weaknesses in cognitive and affective domains.
>
> A statement of the student's current level of performance.
>
> A statement of the general (one year) student centered goals and the specific objectives which the student can be reasonably expected to achieve. Such goals and objectives should be listed in order of priority.
>
> A statement of the suggested teaching approach and methodology for meeting the general student centered goals.
>
> A statement of the types of specialized materials and equipment necessary to enable the student to meet the objectives.
>
> A statement of the monitoring and evaluation strategies.
>
> A statement of the types and amounts of services (in terms of periods per day and per week) which are necessary to enable the student to achieve the objectives, including a statement of the duration and frequency of the period during which the student should receive the services.
>
> A statement of whether the particular services to the student should be provided in a classroom setting, in a small group, or on an individualized basis.

A statement recommending the daily duration of the program.

A statement recommending the number of days per year on which the student's program should be provided, with justification if the number differs from the number of days in the regular school year.

A statement of the student's transportation needs.

The criteria for the student's movement to the next less restrictive prototype.[1]

OVERVIEW OF THE IEP COMPONENTS

Both PL 94-142 and Massachusetts 766 designate specific components of the IEP document. These components are similar, the primary difference being the inclusion of the student profile in the Massachusetts 766 IEP. Several special educators have noted that the components of the IEP document are a product of a decision-making process. (Gillespie-Silver, 1979; Kladder and Gibbons, 1975; Morrissey and Safer, 1976; and Tracy). Therefore, its components should be internally consistent.

Stages in a Decision-Making Process

The stages of this decision-making process are:

1. Recognition of a problem (referral);
2. Gathering data in order to define the problem;
3. Establishing tentative solutions;
4. Implementing these tentative solutions;
5. Monitoring the efficacy of the solutions;
6. Review of the evaluation results, and
7. Revision of the solutions and perhaps further definition of the problem according to the feedback from the evaluation results.

Recently, the decision-making process of the IEP has been formalized. It is now used by educational systems as a guide in which administrative and programmatic decisions are made. This process is continual and on-going; monitoring of decisions is an important component. The decision makers establish objectives (outputs) and methods for reaching these objectives (inputs and processes). Decisions made are considered products or outputs of the process. The system engaged in the decision-making process can be defined by the kinds of decisions made by its members; the bases for making these decisions; and the point at which these decisions were made.

---

[1] Regulations 766, Massachusetts Department of Education, Boston: Division of Special Education, 31 St. James Avenue, Room 600, September, 1978.

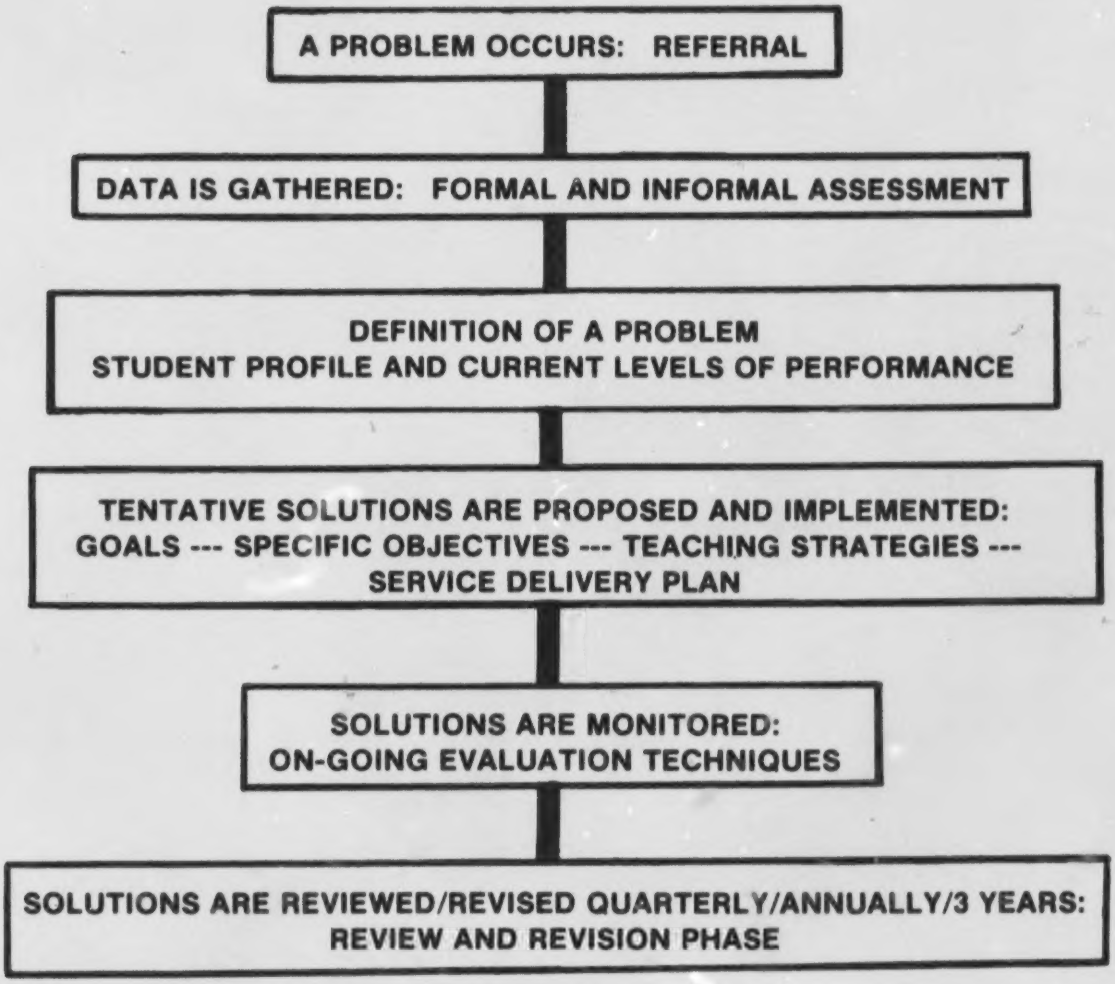
The IEP As A Decision-Making Process

The development of the IEP can be viewed as a vehicle for engaging in systematic decision-making. The goals, objectives, teaching approaches, and service delivery can be viewed as the kinds of decisions by the participants; the assessment data that results in the student profile and levels of performance can be viewed as the bases for this decision; data of formulation of the IEP can be viewed as the point at which these decisions were made.

Steps In The IEP Decision-Making Process

The development of an IEP begins with the referral and ends with the review/revision phase. Assessment procedures are used to gather data in order to define the student's problem. This definition results in a proposed plan consisting of the student profile, levels of performance, general goals, teaching strategies, evaluation and monitoring techniques, specific objectives, and a service delivery plan. The IEP is implemented as a tentative solution to meet the needs of the student. On-going evaluation procedures are designated to monitor the effectiveness of these solutions. In the review/revision phase of the IEP, the solutions are evaluated by teachers, parents, and often the student. (See Chart I). As a result, the necessary revisions are made. Because the steps in the IEP decision-making process are interrelated, e.g. objectives based on goals, the IEP document should be internally consistent. The document should not be viewed as a collection of unrelated components. This internal consistency is an important factor in evaluating the effectiveness of the team members' decisions concerning the needs of the student.

CHART I: THE IEP AS A DECISION-MAKING PROCESS


A PROBLEM OCCURS: REFERRAL
DATA IS GATHERED: FORMAL AND INFORMAL ASSESSMENT
DEFINITION OF A PROBLEM
STUDENT PROFILE AND CURRENT LEVELS OF PERFORMANCE
TENTATIVE SOLUTIONS ARE PROPOSED AND IMPLEMENTED:
GOALS --- SPECIFIC OBJECTIVES --- TEACHING STRATEGIES ---
SERVICE DELIVERY PLAN
SOLUTIONS ARE MONITORED:
ON-GOING EVALUATION TECHNIQUES
SOLUTIONS ARE REVIEWED/REVISED QUARTERLY/ANNUALLY/3 YEARS:
REVIEW AND REVISION PHASE

STUDENT PROFILE

Prior to the 1960's, many of the assessments of special students' needs typically resulted in applying a label to the student. Many special educators assumed that students with the same label learned in the same manner. In the 1960's, such special educators as Samuel Kirk (1963), Marianne Frostig (1967), and Joseph Wepman (1967) noted that intra-individual differences in students with special needs and stressed that assessment should examine the students' individual approaches to learning. How the student receives, processes, retains, and expresses information have been considered to be the student's learning style. Also, the conditions under which information is presented (e.g. small group, individual instruction, relatively stimulus free environments), the rate at which he learns and how she approaches a task have been considered to be components of the student's learning style.

Assessment of Learning Style. Many of the proponents of the learning style approach have developed tests to assess the student's intra-individual differences. Such tests as the Illinois Test of Psycholinguistic Abilities-ITPA, (McCarthy, Kirk and Kirk,1968), and the Developmental Test of Visual Perception - DTVP, (Frostig) were designed for diagnosis of intra-individual differences in language and visual perception. Moreover, these authors have developed programs to accompany their tests (e.g., Frostig and Horne, 1964; Kirk and Kirk, 1971). Critics of these tests and programs cite the lack of reliability and validity of the subtests and the lack of clear-cut evidence that training in these skills by these tests enhance academic achievement (Sedlack and Weener, 1973; Hare, Hammill and McGettigan, 1975; Leibert and Sherk, 1970; Hammill and Larsen, 1974). Furthermore, many of these tests have been used incorrectly, e.g. administration of the ITPA to secondary students.

If the assessment team assesses the learning style of a student, they must be aware of the limitations of their instruments and combine formal assessment with the use of informal diagnostic tests, systematic observations, and interviews. Trial or diagnostic teaching lessons can be used to determine the student's approach to a task. Varying the mode of presentation and response requirements in these lessons can assist in determining how the student approaches a task. By using a combination of these approaches, a team can look for patterns of behavior. The student's strengths and weaknesses in such areas as reception, perception, and expression can be determined. Teaching strategies that emphasize the student's strengths can be proposed. The following chart illustrates a profile of a student's assessment information:

	RECEPTION			PROCESS			RETENTION				EXPRESSION		
	V	A	P-M	V	A	P-M	V	V-M	A	P-M	V-M	Ve	P-M
STRENGTHS													
WEAKNESSES		X			X				X			X	

Ve = verbal
V = visual
A = auditory
P-M = perceptual motor
V-M = visual motor

Reception skills in the areas of visual, auditory, and perceptual motor skills can be affected if the student has a sensory deficit. Such skills as auditory and visual discrimination are considered to be processing skills. For example, a student may have intact sensory modalities, but may not be able to use them effectively, (e.g. have an auditory discrmination problem). The student may process information, but may not be able to retain it, e.g. visual memory problems. The student may possess skills in the areas of reception, processing, retention, but may not be able to express himself/herself verbally or motorically. Some physical constraints, e.g. speech and motor handicaps, may affect expression as well as lack of experience, conceptual development, organizational skills and so forth.

Rate of Learning. Included in an assessment should be the determination of the student's rate of learning and the conditions that affect his/her performance. The rate of learning can be assessed by recording the student's responses to tasks over a specific period of instruction, (e.g. thirty minute sessions for five days). Accuracy as well as rate should be considered because a student may finish a task in above average time, but not reach a designated criterion.

Approach to a Task. The student's ability to consider all alternatives before responding, his/her fear of learning, and confidence in his/her abilities should also be part of the student's profile. For example, a student may answer impulsively without considering the correctness of his answers; s/he may rush through his/her lessons without checking for errors, or may refuse to answer questions for fear of failure or ridicule.

Conditions for Learning. The conditions that affect the student's responses can be determined via systematic observation techniques. The student's behavior in a large group versus small group and individual instruction, his/her responses to open versus more structured setting, to peer and teacher interactions, his/her motivations and interests, social adjustments, can be determined by observing the student in his/her educational environment.

Physical Constraints. If a student has a physical constraint, e.g. a hearing loss, s/he must use another modality for receiving information. Also, a student may have physical constraints that affect expression, such as motor difficulties, or speech handicaps. The assessment team should consider the student's physical constraints during the assessment process. Intact modalities must be tapped, e.g. a deaf child will need visual presentations also these physical constraints should be considered during instruction, e.g. the use of talking books for a blind child.

CURRENT LEVELS OF PERFORMANCE

Information for current levels of performance should be derived from multiple sources. Because the student's performance on standardized norm-referenced tests results in levels (typically grade levels); the tendency may be to list these grade level scores as current levels of performance. This practice has several limitations: (1) norm-referenced tests yield information concerning the student's relationship to the group. This type of information may be used to determine eligibility for special services, i.e., indicate if the child's performance varies significantly from that of his/her peer group, however, rarely does this test information provide information for specific program planning and implementation. Instead, individualized diagnostic and criterion-referenced tests can be used to determine the student's specific levels of functioning. If grade level scores are to be used, the student's specific behaviors on the tests should be indicated.

For example, if the student scores 7-5 on a visual-motor test, the student's specific skills in visual motor integration as measured by that test should be noted, e.g. can draw circles, segment squares, triangles. If the current levels of performance indicate the point at which instruction should begin, progress after implementation can be easily determined. Current levels of performance should indicate what the student can do, (e.g. follow two command directions) and cannot do (intersect lines in geometric figures) in the "intellectual, mental, social, and physical capabilities, including use of legs, arms, eyes, ears, and speech" (Hayes, 1977, p. 15). These specific statements concerning levels of performance should guide the Team in developing goals for the student.

ESTABLISHING GENERAL STUDENT-CENTERED GOALS

According to Hayes (1977), the most frequently read sections of the IEP are the general goals and the specific student centered objectives. These sections will probably be used most often for program planning and implementation. If goal statements are to be used for developing instructional strategies, they should be based on the information in the student's profile and the current level of performance. The goals indicate: (1) the domain or area of concern; (2) the direction of expected changes; and (3) the present and expected level of change (Walker, 1979). The specific skills within the area of domain should be specified. For example, Column A gives examples of specific skill statements, while Column B lists general domains that are not as beneficial in developing specific objectives:

COLUMN A	COLUMN B
THE STUDENT WILL MASTER ALL MULTIPLICATION FACTS.	THE STUDENT WILL INCREASE HIS SKILLS IN MATH
THE STUDENT WILL INCREASE HER IDENTIFICATION OF THE BASIC SIGHT WORDS FROM LEVEL I OF THE DOLCH LIST TO LEVEL III	THE STUDENT WILL INCREASE HER READING SKILLS
THE STUDENT WILL INCREASE SOCIAL SKILLS BY DECREASING HITTING STUDENTS ON THE PLAYGROUND	THE STUDENT WILL DECREASE HER AGGRESSIVENESS.

If goals are based on current levels of performance, the direction of the expected changes and the present and desired levels can be specified in the general goals. An example of a general goal based on a current level of performance is provided by Hayes (1977, p. 17).

Present Level: Count to 5 by rote.
Annual Goals: (a) will count to 100
(b) will match numerals and numerals to 10
(c) will recognize numerals to 10.

Setting Priorities. General goals represent the scope and sequence of the student's program; placing these statements in order of priority assists program implementers in presenting the teaching strategies in a hierarchical or sequential order. The decision to place goals in a specified order should be a Team decision. The teachers, parents, and student, when appropriate, should engage in this process. The decision may be based on several conditions:

Previous experience, instruction and age - The student's past experiences with a specific skill area and his/her age may influence the order of importance of a goal. If the student is in tenth grade and has received remedial reading instruction for several years, yet has not progressed beyond basic sight words, the Team may place such goals as teaching reading skills after vocational skills in order of importance (Hayes, 1977).

Hierarchical Organization- Some goals must be achieved before others can be met. For example, the student must learn the order of the alphabet before s/he can use a dictionary independently, and the student should possess the concept of numbers before s/he can add.

Critical Needs - Some of the student's behaviors may be affecting his/her success in other areas and, therefore, may need to be addressed first. For example, a student with a severe reading deficiency may also display aggressive actions that are harmful to himself/herself and others. These aggressive behaviors should be attended to before academic instruction can be emphasized.

Motivation and Interests - The motivations and interests of a student should be considered when goals are placed in order of priority. For example, a student may have failed reading and, therefore, may not be motivated to try again. Teaching a student to read a driver's manual may increase his/her interest in learning basic skills in reading.

In summary, the Team Member should consider the student's total life experience when sequencing the annual goals, (interests, prior successes, failures). Moreover, general goals should be related to lifelong goals, e.g., vocational interests. Also, general goals should be ones that ideally can be reached within one year. The student's prior learning rate and the nature of the task should be considered in establishing general goals.

TEACHING APPROACHES AND METHODOLOGIES

Teaching approaches and methods are designated on the IEP as a guide for service providers to help meet the goals and objectives designated for the student. This phase of the IEP process is most important because it describes the specific manner in which the student's needs will be met. These activities are the "core" of the IEP. The selection of these approaches and methods are based on the student profile, physical constraints, and current levels of performance. The areas that these approaches address are designated by the goals.

In the planning phase of the IEP, the Team should agree upon the specific types of approaches and methods and sample activities; however, individual service providers should be responsible for developing the student's curriculum, i.e. daily lesson plans. Also, the liaison should keep other Team Members, including the parents informed about the nature of the program and necessary changes.

Types of Approaches and Methods

Service providers will find a multiplicity of approaches and methods from which to choose when planning their programs. To reach a decision as to the most appropriate program for a student, each service provider must be aware of basic teaching approaches and methods. Lerner (1978) classifies methods according to three basic approaches: (1) methods based on an analysis of the student: (2) methods based on the analysis of the curriculum content; (3) methods based on the analysis of the environmental conditions of learning. This classification is applicable to most remedial approaches for students with special needs.

Analysis of the Student. The first remedial approach is subdivided into cognitive processing approaches, sequential stages of development, and test related systems. Those professionals adopting a cognitive processing approach assess the student's learning style (see section on Student Profile). Some proponents of this approach stress using the student's strengths in teaching new materials while other authorities stress "building up weak areas while teaching through strengths" (Lerner, 1978, p. 104).

Sequential Stages of Development. The sequential stages of development approach focuses on the "hierarchial stages of development of the normal growing child" (Lerner, 1978, p. 105).[1] Proponents of such an approach may use one of Piaget's stages of development and/or Gesell developmental scales to develop strategies for the student.

Test-Related Programs. Test-related programs use specific tests to determine the student's needs. For example, programs have been developed for the Illinois Test of Psycholinguistic Abilities (ITPA) (Kirk McCarthy, and Kirk, 1968) and the Developmental Test of Visual Perception (DTVP) (Frostig, Maslow, Lefever and Whittlesey, 1966).

Analysis of Curriculum Approach. The analysis of curriculum approach analyzes the subject matter of the tasks to be learned. "The method of remediation is the same for all students, no matter how different their learning styles may be" (Lerner, 1978, p. 107). Lerner places such specialized techniques as the visual-auditory-tactile-kinesthetic task analysis strategies, and the use of specific commercial materials under this approach.

Analysis of Environmental Conditions Approach. The final approach, the analysis of the environmental conditions of learning, is classified into: (1) behavioral approach which concentrates on changing the student's behavior, typically using principles of reinforcement or behavior change; (2) psychotherapeutic remediation which concentrates on the feelings of the student and his/her relationships with the therapist (Lerner, 1978, p. 110) and (3) the remediation through pedagogy approach which emphasizes that the inadequacies of the learning environment may be the cause of the student's problem.

In developing an IEP for a special needs student, a combination of all these approaches can be considered. The Team can select components from each approach that will best meet the student's educational needs. Many texts explain the specific components of these approaches.

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[1] Several of these texts are listed in the Participant's Manual.

Criteria for Selection of Teaching Approaches

Service providers should help the Team determine the appropriate teaching approach and methodology. The selection of teaching approaches and methodologies should be based on the following critera:

1. Primary mode of presentation
2. The response requirements - e.g. visual-motor
3. Specific teaching strategies, e.g. use of practice, reinforcement
4. The condition under which the tasks are presented
5. The specific tasks and concepts to be learned by the student

Mode of Presentation. The mode of presentation consists of primary modalities emphasized by the program (e.g. visual and auditory) and the format in which the tasks are presented (e.g. filmstrip and cassettes). While no program uses just one mode for presenting tasks, many methods emphasize one or two modalities. These programs are used to emphasize the strengths of the student. The service provider should avoid strategies that emphasize the student's weakest modality.

Response Requirement. The response requirements of an approach should be considered. For example, is the student required to respond orally, motorically? Do these response requirements capitalize on the student's strengths or weaknesses? Are the program's response requirements clearly delineated?

Specific Teaching Strategies. Specific teaching strategies or approaches to presenting the task include a plethora of extant strategies. Such techniques as modeling (presenting examples), use of concrete or manipulative materials, shaping (reinforcement of successive approximations to a correct response), cueing (assisting the student by providing partial answers), and use of the student's interests and motivations are examples of such strategies.

Conditions for Instruction. The conditions under which the task will be presented should be analyzed. The conditions can be determined by examining the student's learning style, the nature of the task, or the environment in which the task or concept is to introduced. For example, because a student may not effectively learn in large group settings, his/her lessons may be presented in one to one settings, e.g. peer tutoring. The task, e.g. walking on a balance beam, may require small group instruction. The environment includes teacher-pupil and pupil-pupil interactions and the structure of the setting (e.g. learning centers, cubicles).

Task and Concept Analysis. A task and concept analysis should be conducted prior to the development of specific student centered objectives. These analyses should be based on the teaching strategies. Task and concept analyses are not teaching approaches *per se*; rather, they are the process for isolating, describing, and sequencing tasks or concepts to be presented to the student. (Bateman, 1971, p. 33). A task or concept analysis should be a part of any approach (See Module Two).

In summary, each service provider must select from a wide range of strategies and methods that s/he considers to be appropriate in meeting the student centered goals. The student's learning style and current level of performance should determine the specific strategies.

MONITORING AND EVALUATION TECHNIQUES

As stated in Section One, the IEP is a vehicle for the decision-making process concerning the individualized needs of the special student. As with any decision-making process, the efficacy of the programmatic decisions must be evaluated. "Without a strong evaluation component, the individualized educational program would become an empty exercise in planning" (Lilly, 1977, page 26). If service providers do not monitor the student's progress toward meeting each goal, the revision of the IEP will be based on insufficient data, or worse, the IEP will not be revised if participants are not aware of necessary changes.

Data Collection

Team Members should decide upon the types of monitoring and evaluation procedures for each goal recorded on the IEP. Evaluation and monitoring the goals and objectives of the IEP is the responsibility of each service provider and should be coordinated by the liaison.

Direct and Continuous Monitoring. Direct and continuous monitoring techniques and devices accurately describe the student's progress (Van Etten and Van Etten, 1976). This type of measurement is a direct assessment of the student's progress after a given interval. Criterion-referenced and teacher made tests are considered to be direct measures of what the student is learning.

Criterion-Referenced Tests. Criterion referenced tests are often compared to norm-referenced instruments. Norm-referenced tests are considered indirect measures of assessment. In criterion-referenced tests, the individual is evaluated in terms of his/her achievement on specific objectives rather than in relationship to the performance of other individuals. Norm-referenced measures do not possess the level of specificity that criterion-referenced measures do. Moreover, because norm-referenced tests compare an individual to another for the purposes of differential programming, the purpose of the test is to include items that will produce a significant spread in the scores. Test items that do not contribute to score variance are eliminated from the item pool. In this process, many of the concepts or skills necessary for instruction are eliminated from the test. All items for mastery are included in a criterion-referenced test. Because criterion test items are based on clearly defined educational tasks, they are a more direct assessment of the student's progress.

Teacher Made Tests. Teacher made tests should also be based on clearly defined educational tasks. A task and concept analysis is necessary. The teacher must isolate and sequence each subtask to be measured. How the teacher presents the tasks, the wording of the directions, and the student's response requirements all can affect the results. For example, the directions may contain words or concepts that are unfamiliar to the student, or may contain too many units of information for the students to retain the information. Also, the format may be unfamiliar to the student, e.g. addition in columns versus the equation format.

Two types of teacher made tests are diagnostic teaching lessons and probes. A diagnostic teaching lesson is a lesson that teaches and assesses at the same time. A task analysis is conducted and a standard procedure for assessment is chosen. For example, a specific objective serves as a guide for the lesson. The conditions under which the lessons is presented (e.g. visual and auditory modes, one-to-one setting), types of responses of the student and the level of responses (e.g. discrimination, recall, comprehension) can be measured. Also, the type of reinforcement used in the lesson can be recorded.

Measurement of the student's performance on all tasks may be too time consuming for the teacher; therefore, s/he can devise probes of student's behaviors. "The probing process is the practice of taking a relatively brief sample of a pupil's performance on a standard task under conditions" (Haring and Bateman, 1977, page 236). Haring and Bateman describe the basic procedure:

> (1) Selection of a sequence of learning tasks against which the pupil will be assessed; (2) a selection of specific tasks at different levels of performance, or from different performance areas; (3) administering brief probes on several consecutive days to determine where in the sequence the pupil will be placed (p. 236)

With this method, the student's entry point can be determined. For example, on math tasks, the student may succeed on all addition facts, perform inconsistently on subtraction facts, and miss all multiplication facts. Additional probes could be devised to determine what specific processes in subtraction the student can and cannot perform, e.g. cannot regroup. The probing procedure can provide the service provider with information concerning the student's baseline or level of performance. A periodic check of the student's change from the baseline can be used as a monitoring procedure of the IEP.

Systematic Observation. Systematic observation of a student's interactions with his/her environment is another means of direct continuous measurement. As with other direct assessment techniques, a task analysis of what is to be observed must be performed. Only observable actions and signs can be included. For example, rather than observing "aggressiveness" in a child, the service provider must define aggressiveness in such observable actions as "hits other children." Observation of the student's behavior under vaying conditions and at various times can yield information concerning the student's progress, especially in social interaction skills. A frequency count of the student's behavior or the use of anecdotal records are two means of collecting data on a continual basis. (See Module Two)

Recording Procedures

Service providers should select recording procedures that are easy to use, are appropriate for the data being collected, and that clearly communicate the results (Archer, 1976). Checklists, tally sheets, and coding sheets can be used to record the data. The following is an example of a tally sheet for an observation system:

Name: John Doe
Behavior: Hitting students on the playground
Time: 10:00 - 10:15
Day - 1/4/79
𝍸 𝍸

These recording systems should be as simple as possible. Developing standard sheets that contain behaviors that can be checked off or spaces for filling in information can save the service provider time.

Interpreting Data

To analyze the student's performance over a specified period of time, the service provider can compute the data, e.g., percentages, and use graphs or charts (Archer, 1976). These graphs or charts can be used for summarizing changes in a student's behavior and for quarterly and annual reviews. Also, periodic reviews of the data can enable the service provider to change the student's program whenever needed. For example, monitoring the student's progress in learning to read via the "sight approach" may indicate that the student is not making progress. Therefore, the teacher should revise the strategies and utilize an alternative approach.

In summary, direct and continuous measurement of the student's performance will assure that the student's proposed program is appropriate and will meet his/her special needs. Each service provider should be responsible for designing and implementing monitoring and evaluation strategies that match the teaching strategies, goals, and specific objectives.

SPECIFIC STUDENT-CENTERED OBJECTIVES

Specific objectives are the behavioral indicator of the expected outcomes of the instruction. These objectives are written in terms of the child's performance. They indicate the task, mode of presentation of the task and the response of the child based on the learning style of the child.

Specific objectives are the basis for evaluating the child's progress. They are based on the general goals. Each general goal written for one year is task analyzed. There are multiple sequenced steps within each general goal. The specific objectives are those steps whereby the student's performance can be evaluated at the completion of each quarter. Thus, there are three or four specific objectives written for each general goal. This provides a blueprint for instruction rather than a lesson plan.

The major components of a specific objective are indicated below:

1. Condition - A statement of the circumstances in which the behavior will occur. The condition may include the mode of presentation, materials, the setting, grouping, person and time. Some examples of statements of condition are: "Given basic sight words presented on flash cards..." "When given a pen and paper...", "during lunch period, seated with peers...".

2. The Learner - Specific objectives are stated in terms of the learner's performance, not in terms of teachers, parents, or peers' performance.

3. Behavior - The behavior is exactly what you want the student to do. It is an observable, measurable and repeatable activity. So that the behavior can be measured and changes can be evaluated, the behavior needs to be stated in performance terms. The following statements illustrate this requirement:

The student:	writes	folds	places on
	walks	says	draws
	underlines	points to	repeats

   Descriptive terms like, feels, is able, knows, enjoys and understands are inadequate because they may be defined by different teachers in different manners.

4. Criteria - A statement of how well the behavior is to be performed before proceeding to the next task. The criteria states the expected performance level of the individual. Acceptable examples of criteria are "... 80% accuracy within 20 minutes", "...without hitting, kicking for 3 consecutive days", "...so that the words are properly spaced, sized and on the line."

TYPES OF SERVICE DELIVERY

The IEP provision for both the federal and Massachusetts special education laws require that any special services necessary to meet the student's goals, objectives, and teaching approaches be specified in the IEP. Planners should describe the necessary services and ensure that these services are comprehensive and coordinated.

Specification of the types of services within a service delivery area requires that the Team and each service provider designate what goals and objectives are to be met by the service. Greer and Torres (1977) list the advantages of such an approach:

> Perhaps this will be a step toward unveiling the 'mystery' behind the 'therapy'. Second, everyone including the parents, school personnel, and the related service people, will have a clearer understanding of what services everyone expects will be provided to the child (p. 22).

Because each service should be based on the student's specific needs, the decisions concerning types of service delivery should not occur until the student's programmatic needs have been established. Without such a practice, the special education system may match special needs students to existing types of services rather than designing services to meet each student's individual needs. On this issue, Abeson and Weintraub (1977) state:

> Schools, parents and children will be specially aware of everyone's responsibility toward achieving the stated educational goals. With the implementation of an individualized educational program for each handicapped child, children will no longer be grouped or placed on the basis of arbitrary age limits, etiologic labels, or administrative convenience. Rather, they will be provided with individual programs based on their needs (p. 54).

The types of services provided to the student should be comprehensive and coordinated. All the services that are necessary to meet the student's needs should be provided and each service provider should be aware of the activities within each service area in order to avoid duplication of services and to assure that services complement each other. For example, if the student needs speech and language services, these services should complement the language instruction within the student's other programs, e.g. reading instruction. The student should not be receiving services that conflict with each other, e.g., a sight word approach in the regular class and a phonics approach in the resource room. For services to be comprehensive, and coordinated, all Team Members should work closely in developing the student's goals and objectives. Gaps in the student's program can be prevented if each program planner is aware of the range of services provided for the student.

Hierarchy or Cascade of Services

With the introduction of Deno's Cascade Model of Alternative Educational Environments (Deno, 1972), and the results of court cases dealing with special needs students' right to be educated within regular classroom environments, as much as possible, many educational systems have established a hierarchy of special educational services. (See Module One). The term "least restrictive alternative" has been used in describing services that educate the student in environments that do not restrict the rights of the student to be within the educational mainstream anymore than necessary. The environments are considered to be more restrictive the further they are removed from regular educational environments. For example, residential settings are considered to be the most restrictive.

In choosing the student's educational environment, the Evaluating Team should "determine a placement setting as close to the regular classroom as possible where the program can be implemented effectively and the child's needs met" (Walker, 1979, p. 158). Of primary concern to service providers is the efficacy of program implementation; therefore, prior to the completion of selection of service delivery systems, each possible setting must be examined to determine if the personnel within that setting possesses the skills, knowledge, and specialized materials to meet the student's needs.

Movement to Less Restrictive Settings

Too often, a special student is placed in a restrictive setting without much consideration by the Team Members as to the criteria for moving the student to a less restrictive setting. Without such exit criteria, the practice of keeping the student in the initial service setting may occur. Moreover, the student's long term goals may be neglected.

Because the decisions to move a student to a less restrictive environment are most often "situationally specific", arbitrary criteria for movement across settings should not be encouraged. However, guidelines for this movement can be established.

Exit criteria can be placed under three categories:

1. Those criteria that focus on changes within the student;
2. Criteria that focus on changes within the least restrictive environment; and
3. Criteria that combines the first two approaches.

If service providers choose the first approach, i.e. change the student, they are in danger of fostering a "catch up-keep up" curricula and moving away from the concept of individualized education for all students. If goals for the student are such that s/he is to meet the entry requirements for a less restrictive environment, his/her individual needs may be ignored, e.g. the regular classroom curricula may become the focus of the IEP rather than the student's individual needs. Such an approach may assume that the next less restrictive environment has a more homogeneous approach to the delivery of education services, i.e. the closer the student gets to the regular educational environment, the more restricted and exclusive are the entry requirements. (Walker, 1978)

If service providers choose the second approach - a change within the environment - educators may have logistical problems delivering services to students whose skills are significantly below those of the group. Less restrictive environments typically require students to be independent learners in most skill areas. Therefore, a change in this practice to meet the special student's needs who is not able to learn independently, would be too demanding for the student.

A compromise between both approaches would be criteria that require changes in the student and accommodations within the environment. For example, movement to a less restrictive setting may occur if the student can read as well as the lower 25 percent of the class (Lovitt, 1978), and has independent study skills as compared to other students placed within that type of setting. Criteria for the receiving setting, such as materials on various reading levels, self-instructional techniques and materials, and skill grouping, could also be designated. Goals for the student are those that enable him/her to become an independent learner. This process may involve increasing the student's skill level in such areas as reading or math or facilitating the student's use of compensatory devices, e.g. instructional materials that teach a blind student to read ink print with an optacon (Weisgerber, 1978). Concurrently, service providers must be prepared to provide learning environments in which the student is able to use his/her compensatory strategies to succeed.

These criteria for movement to the next less restrictive setting should be placed on the IEP so that service providers can implement strategies for developing the student's skills for entry into that setting and to plan with possible future service providers necessary strategies for accommodating that student in his/her new environment. The criterion for movement to a less restrictive environment could specify these goals and the necessary accommodations for the student within the less restrictive setting, e.g. use of compensatory strategies. These accommodations may consider the student's level of performance, learning style, and physical constraints. It is also important to include within the criteria the use of instructional techniques and management strategies that were successful within the more restrictive setting.

In summary, the types of services a student receives should be based on his/her goals, objectives, and instructional strategies. Furthermore, these services should be comprehensive and coordinated to avoid gaps and overlaps in service delivery. The goal of human service delivery personnel should be to create environments that accommodate the student's needs so that s/he can become an independent learner.

SUMMARY

The IEP document can be viewed as a product of the Team's decision-making process for meeting the student's individual needs. Rather than keeping such documents merely for accountability purposes, the IEP document can serve as a "blueprint" for instruction. Service providers can work closely in developing a comprehensive and integrated program for the student. No gaps or overlaps in the student's program will occur if the document is internally consistent, i.e. goals are based on the student profile and current level of performance and so forth. Monitoring and evaluating strategies are implemented to assure the efficacy of the teaching strategies and service delivery plan.

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3.1

COMPONENTS OF THE INDIVIDUALIZED EDUCATIONAL PLAN

- **STUDENT PROFILE,** INCLUDING ADDITIONAL INFORMATION
- **CURRENT LEVELS OF PERFORMANCE**
- **STUDENT-CENTERED GOALS**
- **TEACHING APPROACHES AND METHODOLOGIES**
- **MONITORING AND EVALUATION TECHNIQUES**
- **SPECIALIZED EQUIPMENT AND MATERIALS**
- **STUDENT-CENTERED SPECIFIC OBJECTIVES**
- **SPECIAL EDUCATION SERVICE DELIVERY PLAN**

SPED – 766-5 Page 1 of 4

Type of TEAM meeting: ____________
Meeting date: ____________
Plan covers the period from:
____________ to ____________
Liaison name: ____________
Liaison position: ____________

Identification No.: ____________
School: ____________
Grade: ____________
Student's dominant language: ____________
Language of home: ____________
Prototype: ____________

INDIVIDUALIZED EDUCATIONAL PLAN

Student Name: ____________ Birthdate: ____________ Home Phone No.: ____________

Parent(s) Name(s): ____________ Address: ____________ Work Phone No.: ____________

TEAM PARTICIPANTS

Signature, if in attendance	Name	Role/Assessment Responsibility
		Chairperson/

I certify that the goals stated in this plan are those recommended by the TEAM and that the indicated services will be provided.

Principal: ____________ (Signature/Date)
Special Education Administrator: ____________ (Signature/Date)

If placement outside the local education agency is recommended, I certify that the facility, ____________ (Name/Address)
is able to provide the services stated in this plan.

Director of Accepting Facility: ____________ (Signature/Date)

RESPONSE – Circle one: Parent(s)/Guardian/Surrogate parent/or Student over age 18, sign next to your choice, and comment if you wish.

I accept the educational plan. ____________ (Signature/Date)
Comments: ____________

I do not accept the educational plan. ____________ (Signature/Date)

I postpone a decision until an independent evaluation is completed. ____________ (Signature/Date)

STUDENT PROFILE:

ADDITIONAL INFORMATION:

SPECIAL EDUCATION SERVICE DELIVERY: Type of Service	Focus on Objective Numbers	Type of Setting					Location	Personnel	Projected Date Service Begins	Frequency and Duration of Service per Day/Week	Total Hours per Week
		Class	Small Group	Individual	Regular	Special					
Total hours of special education service delivery per week											

CRITERIA for movement to next less restrictive prototype:

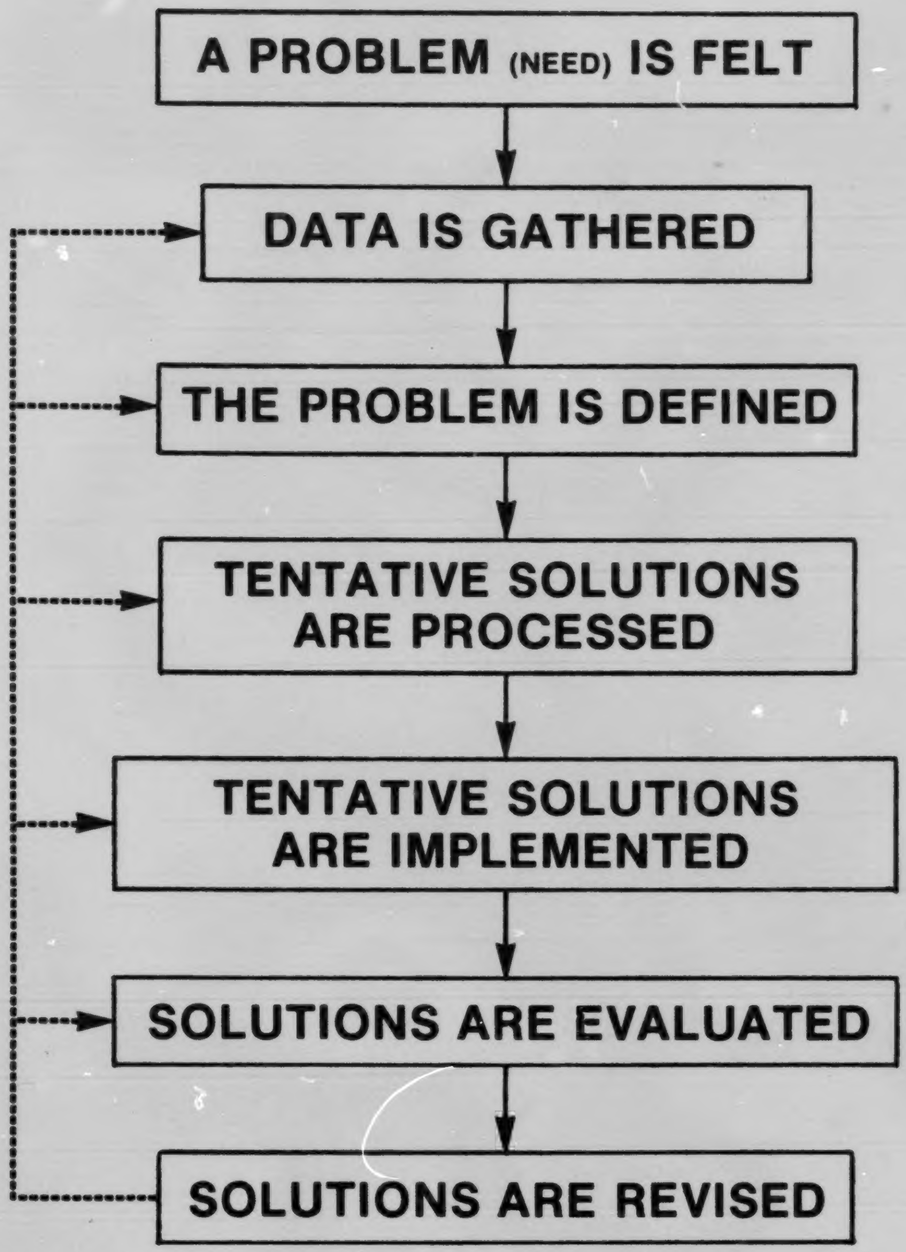
IF OTHER THAN REGULAR, state the annual duration of program __________ days, daily duration of program______________ hours, and transportation plan:

CURRENT PERFORMANCE LEVEL	GENERAL STUDENT CENTERED GOALS	PRIORITY NUMBER	TEACHING APPROACH AND METHODOLOGY MONITORING AND EVALUATION TECHNIQUES SPECIALIZED EQUIPMENT AND MATERIALS

Goal Number	Objective Number	SPECIFIC STUDENT CENTERED OBJECTIVES	Quarters during which objectives will be addressed			
			1	2	3	4

3.2

THE DECISION-MAKING PROCESS


A PROBLEM (NEED) IS FELT
DATA IS GATHERED
THE PROBLEM IS DEFINED
TENTATIVE SOLUTIONS ARE PROCESSED
TENTATIVE SOLUTIONS ARE IMPLEMENTED
SOLUTIONS ARE EVALUATED
SOLUTIONS ARE REVISED

POINTS FOR DECISION-MAKING

KINDS OF DECISIONS

STUDENT-CENTERED GOALS, SPECIFIC STUDENT-CENTERED OBJECTIVES, TEACHING APPROACH/ METHODOLOGY, ON-GOING EVALUATION AND MONITORING TECHNIQUES, SERVICE PLAN DELIVERY

BASES FOR DECISIONS

STUDENT PROFILE AND CURRENT LEVELS OF PERFORMANCE (BASED ON FORMAL AND INFORMAL ASSESSMENTS)

POINTS AT WHICH DECISION IS MADE

DATES OF THE IEP MEETING(S)

ACTIVITY ONE: THE IEP AS A VEHICLE FOR DECISION-MAKING

Purpose

The purpose of this activity is to introduce you to the components of the Individualized Educational Plan. The IEP document is viewed as an internally consistent product of a systematic, decision-making process - i.e., goals should be based on the information found in the student profile and current levels of performance; specific student centered objectives should be based on goals and so forth.

Instructions

The IEP document can be viewed as a product of a systematic decision-making process. Place the IEP components found on pages 31-34 on the decision-making flow chart. Three of the IEP steps are provided for you.

THE IEP AS A VEHICLE FOR DECISION-MAKING

A Problem (occurs): Referral

Gathering Data to define the problem:

Formal and Informal Assessment

Defining the problem: ____________

and ____________________________

Tentative Solutions: (1) __________

(2)______________________________

(3)______________________________

(4)______________________________

Solutions are monitored: __________

____

Solutions are reviewed/revised: Quarterly and Annual Review/Revision:

____

3.4

STUDENT PROFILE

LEARNING STYLE

HOW THE STUDENT . . .

- RECEIVES . . .
- PROCESSES . . .
- RETAINS . . .
- EXPRESSES INFORMATION

HOW THE STUDENT MANAGES A TASK

THE RATE THE STUDENT LEARNS

THE CONDITIONS UNDER WHICH (S)HE LEARNS (MOTIVATIONS, INTERESTS)

PHYSICAL CONSTRAINTS

STRENGTHS AND WEAKNESSES IN COGNITIVE AND AFFECTIVE DOMAINS

A STUDENT PROFILE SUMMARY

	RECEPTION			PROCESS			RETENTION				EXPRESSION		
	V	A	P-M	V	A	P-M	V	V-M	A	P-M	V-M	Ve	P-M
STRENGTHS													
WEAKNESSES													

Ve = verbal
V = visual
A = auditory

P-M = perceptual motor
V-M = visual motor

3.6

INFORMAL AND FORMAL ASSESSMENT

- NORM-REFERENCED GROUP TESTS
- NORM-REFERENCED INDIVIDUAL AND GROUP DIAGNOSTIC TESTS
- CRITERION-REFERENCED TESTS
- RATING SCALES
- INFORMAL TEACHER-MADE TESTS
- DIAGNOSTIC TEACHING LESSONS
- INTERVIEWS
- OBSERVATION

ACTIVITY TWO: THE STUDENT PROFILE

Purpose

The purpose of this activity is to introduce to you the components of the student profile.

Instructions

1. Read the case materials on pages 42-46.
2. Identify the student's profile based on the summary of the evaluation results.
3. Choose a group recorder and place your results on newsprint.

Student Profile:
(Use back of this sheet if necessary)

CASE STUDY

Referral Information

James (age 9-2) is having problems in the regular classroom in academic and behavioral areas. He has difficulty working in a large group setting. He does not finish his work unless I am available to help him. He usually talks out of turn and to his neighbors during large group instruction. He is able to complete a task if I explain the directions to him individually. He does not seem to be able to follow directions if they include more than two steps.

James seems to have little interest in achieving in any of his subjects. He rushes to complete his work and seldom checks his answers. He is interested in the outdoors (the family lives on a farm) and I have been able to sustain his interest when we discuss animals, plants, hiking and backpacking.

James doesn't hear the sound in words, especially short vowel sounds, but he can remember basic sight words. He is at least two grade levels below the average reading group. On short reading passages that contain basic sight words, his comprehension is excellent.

In spelling, he is able to identify initial consonants but not medial and final sounds. His spelling appears patternless, i.e., he seems unaware of such patterns as: oi, er, ai, eigh, or, ly, un, and so forth. On a diagnostic spelling test, he scored at the second grade level, which is two years below the norm.

In math, James has good reasoning skills but cannot remember the addition and subtraction facts. He has a tendency to count objects on his fingers in order to answer the problems. He can identify simple fractions (e.g., 1/3 and 1/4).

He has many problems interacting with his peers. He has few friends because he is such a "bully". On the playground, in the lunchroom, and occasionally in the classroom, he hits his classmates. Most of the students are afraid of him because he threatens to hurt them if they do not follow his orders in group activities.

M. Jrea
Meadow Valley School
4th Grade

SUMMARY OF TEST PSYCHOEDUCATIONAL ASSESSMENTS OBSERVATIONS AND INTERVIEWS

Language Assessment

James' results on the Belltone Audiogram shows no decibel loss in either ear. All the results fell within the normal range. Auditory discrimination tests indicated some problems in discrimination between medial sounds, especially short vowel sounds. On the Roswell-Chall Auditory Blending Test James had problems blending more than two syllable words.

On the Peabody Picture Vocabulary Test (PPVT), James' receptive vocabulary was 11-0 which is above average for his age (9-2). On the Botel Reading Inventory, Word Opposites, James scored at the fourth grade level. He does not seem to have any problems with identifying verbal opposites.

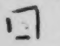
On subtests of the Illinois Test of Psycholinguistic Abilities, James scored 10-0 in Auditory Association (e.g., A rabbit is fast, a turtle is ________), 6-6 in Sound Blending, 10-5 in Grammatic Closure and 6-0 in Auditory Sequential Memory.

In summary, James appears to have above average ability in receptive vocabulary and verbal reasoning skills as measured by the tests administered. His skills in auditory memory, discrimination, and blending are significantly below his age level.

Ms. Doe
Language Specialist
Meadow Valley
School

Psychological Testing

On the Wechsler Intelligence Scale for Children (WISC-R), James scored a total of 114 on the verbal subtests, and 95 on the performance subtests with a full scale of 103. On the verbal subtests he scored average on Vocabulary, above average on Information, Comprehension, Similarities, and below average on Arithmetic and Digit Span. On the performance subtests, he scored below average on Picture Completion, Block Design, and Coding. He scored average on Object Assembly and above average on Picture Arrangement. James' greatest strengths appear to be in Verbal Reasoning Skills and comprehension. His weaknesses appear to be in tasks that involve memory (digit span and math). The Arithmetic subtest requires the student to perform the operations without the benefit of paper and pencil. He is also weak in visual-motor coordination and visual reasoning.

On the Beery Visual-Motor Integration Test (Follett Publishing Company) James scored 7 years/3 months. He can reproduce circles, squares, rectangles, triangles, and diamonds; however, he cannot intersect the lines. His figures were segmented, e.g.,  . He also had problems with internal detail, e.g., triangles within squares.

M. J. Smith
School Psychologist
Meadow Valley School

Educational Report

On the Key Math Diagnostic Test, James scored an overall math score of 2.0. His strengths included the ability to tell time on a standard wall clock and in numerical reasoning. His weaknesses were in the area of subtraction, addition, and simple fractions. In subtractions and addition, he could not regroup, he could not add fractions.

On the Brigance Diagnostic Inventory of Basic Skills, a criterion-referenced battery of tests, James was able to add and subtract two place numerals, e.g. $\begin{array}{r}22\\+22\\\hline\end{array}$ or $\begin{array}{r}22\\-20\\\hline\end{array}$ but he could not add or subtract numerals that required regrouping, e.g., $\begin{array}{r}23\\+48\\\hline\end{array}$ $\begin{array}{r}45\\-38.\\\hline\end{array}$ I noted that he tended to count on his fingers to obtain answers for the addition and subtraction problems.

On a Reading Miscue Inventory (RMI), James used visual and phonetic strategies (90% of the time) rather than grammatical and meaning strategies (only 10% of the time). He seldom corrected his miscues. Instead, he appeared to hastily guess at the words; most often saying a word that looked like the expected response. He attempted to "sound out" some words, but was incorrect fifty percent of the time. On the second grade passages in the Scott Foresman Program, he was able to discuss the theme, plot, sequences, and factual information of the story. He made so many miscues (60 per hundred words), that he was unable to discuss the theme, plot, and so forth. In using graphic cues, he was successful 50% of the time. In meaning and grammar cues, he was correct 100% of responses.

On an informal inventory of phonics and structural analysis skills, James could identify the long vowel sounds, all the initial consonants except z, all the blends except sp, str, gr. He could not identify any of the short vowel sounds and vowel digraphs (ee, ea, ou, etc.) and the dipthong oi. In structural analysis skills, he could not identify more than two syllables in a word, could identify compound words, could not identify prefixes, suffixes, and word endings.

On an informal spelling test, James had problems writing all the cursive letters of the alphabet. He reversed the b, d, and z. He could spell some basic sight words, (and, was, the, an, are, were), but had problems with such words as corner (Kan-). He did not appear to be aware of any spelling patterns, e.g., i before e, ou, ir, ly, er, etc. His strength was in the representation of the initial consonants. His major weakness was the representation of medial and final spelling patterns.

On an informal test of auditory memory, James was able to remember two to three directions in sequence. He had problems with directions beyond three commands and was inconsistent with three command directions (was correct 60% of the time). On the memory subtest of the Durrell Reading Analysis, James was able to write all the words from memory. Some of the words were long (e.g., ampersand).

On four sequential diagnostic teaching lessons (over four days) on learning the addition facts, James was able to recite one fact per two seconds; however, on each day he missed 50% of the answers. He does not seem to "slow down" to reflect his answers. On the fifth day, I asked him to "slow down"; to stop and think before he answered. He could recite one fact per 5 seconds. He was 80% correct.

Observations in the classroom: Both the school psychologist and I observed James in his classroom. Our summaries are combined. James seemed to have problems attending to class discussion. Often he would interject answers in math or reading group immediately after the teacher would ask the questions. He was always wrong. After the teacher told him the answer, he would hang his head and fiddle with his papers or pencil. After a few interactions such as this, James appeared to quit listening and begin to pester (hitting, pinching) his neighbors. The students would tell the teacher that James was bothering them. James would reply that his neighbor started the fight.

Interview with James: I asked James what he thought were his problems in the classroom. He replied that he cannot read or do math. He said that when he tried to do things, he got "all mixed up". He said he cannot remember what the teacher says most of the time. When asked if he enjoyed playing with other children, he said he is the "toughest boy in the class."

Interview with Mrs. Doe: Mrs. Doe informed me that James does not misbehave at home. She says he has problems following directions, getting dressed in the morning and catching the bus on time. She said that his room is always disorganized and that he is always losing his belongings. His sister, who is in the second grade, teases James because he can't spell as well as she. The family has spelling matches at the dinner table and his sister always wins. Often he pouts after dinner.

Ms. Margaret Jones
Generic Specialist
Meadow Valley School

CURRENT LEVELS OF PERFORMANCE

--- DESCRIBE WHAT A STUDENT CAN AND CANNOT DO

--- SHOULD INDICATE THE STUDENT'S ENTRY LEVEL

--- CAN BE DETERMINED FOR ACADEMIC SKILLS, SOCIAL ADJUSTMENT, SELF-HELP SKILLS, LANGUAGE SKILLS, PRE-VOCATIONAL AND VOCATIONAL SKILLS

ACTIVITY THREE: CRITERIA FOR CURRENT LEVELS OF PERFORMANCE

Purpose

The purpose of this activity is to introduce you to the criteria for current levels of performance and to the process for the identification of current levels of performance.

Instructions

Read each example of level of performance and place a check before each one that you consider to meet the criteria presented by the session leader.

_______ 1. Can wash her face

_______ 2. Cannot intersect lines in squares, diamonds, triangles

_______ 3. Reads on a 3.0 grade level

_______ 4. Can count to ten by rote

_______ 5. Can read all the words on the Dolch Basic Sight Word List

_______ 6. Math skills are on a 2.0 grade level

_______ 7. Has problems with addition and subtraction

_______ 8. Can name the symbols for addition and subtraction

_______ 9. Can comprehend reading passages

ACTIVITY FOUR: DETERMINING CURRENT LEVELS OF PERFORMANCE

Instructions

Read the case materials in Activity Two and identify the current levels of performance in reading, math, spelling, cognitive skills, visual and auditory perceptual and motor skills, language skills and social adjustment.

Levels of Performance

READING

MATH

SPELLING

COGNITIVE SKILLS

AUDITORY PERCEPTION

VISUAL MEMORY

AUDITORY MEMORY

PERCEPTUAL MOTOR SKILLS

LANGUAGE SKILLS

SOCIAL ADJUSTMENT

3.8

CRITERIA FOR GENERAL STUDENT-CENTERED GOALS:

. . . GOALS SHOULD BE BASED ON THE STUDENT PROFILE AND CURRENT LEVELS OF PERFORMANCE

. . . GOALS ARE A GUIDE TO PROGRAM PLANNING AND IMPLEMENTATION

. . . GOAL STATEMENTS INCLUDE DESIRED CHANGES IN SPECIFIC SKILL AREA

. . . GOALS INDICATE DIRECTION OF CHANGE AND DESIRED OR EXPECTED LEVELS OF CHANGE

GOALS SHOULD BE PLACED IN ORDER OF PRIORITY BASED ON:

. . . THE TEAM CONSENSUS

. . . THE EMPIRICAL AND LOGICAL ARRANGEMENT OF TASKS

. . . CRITICAL NEEDS

. . . PRIOR EXPERIENCES, INSTRUCTION, AND AGE

ACTIVITY FIVE: ESTABLISHING GENERAL STUDENT-CENTERED GOALS

Purpose

The purpose of this activity is to introduce you to the criteria for establishing general student centered goals and to provide practice in the development of goal statements.

Instructions

1. Review the student profile and the current levels of performance developed for Activities Two and Four.
2. Write general student centered goal statements using the criteria provided by the session leader. Write the goals in order of priority.
3. Choose a group recorder and place your goal statements on newsprint for the purpose of large group discussion.

General Student Centered Goals: (Use the back of this sheet if necessary).

TEACHING APPROACHES AND METHODS

... IMPLEMENTATION STAGE OF THE IEP

... BASED ON STUDENT PROFILE AND CURRENT LEVELS OF PERFORMANCE

... GOALS SPECIFY AREAS OR DOMAINS

... DEVELOPED BY THE SERVICE PROVIDER

STATEMENT OF TEACHING APPROACH/METHODOLOGY SHOULD INCLUDE:

... THE TYPE OF TEACHING APPROACH OR METHOD

... THE TYPE OF ACTIVITY

EXAMPLE: TYPE OF TEACHING APPROACH — USE OF MANIPULATIVE MATERIALS

TYPE OF ACTIVITY — CLOTHES PINS FOR DEVELOPING THE CONCEPT OF ONENESS, TWONESS

TEACHING APPROACHES

. . . LEARNING STYLES

. . . TASKS OR CONTEXT

. . . ENVIRONMENT

EXAMPLES OF TEACHING STRATEGIES

--- USE OF MANIPULATIVE MATERIALS

--- USE SMALL, SEQUENTIAL STEPS

--- USE MODELS

--- DEMONSTRATE TASKS

--- PROVIDE PRACTICE

ACTIVITY SIX: TEACHING STRATEGIES AND METHODOLOGIES

Purpose

The purpose of this activity is to introduce you to the process for selecting teaching approaches and methods that meet the special student's educational needs.

Instructions

1. Review the student profile, current levels, performance, and the goals you have written for James.

2. Choose four goals for James and select strategies (found on pages 51-57) that will match each goal. After each selection, specify your rationale for your choice and note an activity to match each approach.

   Example: Strategy: Multisensory. Rationale: The student learns best through a combination of modalities.
   Activity: Sandpaper letters to teach the alphabet.

3. Complete the worksheet on page 58.

4. Choose a group recorder. The recorder should place the group's answers on newsprint.

TEACHING APPROACHES

Student Based

  Process Approaches

- Teach to student's strengths
  - visual
  - auditory
  - Tactile-Kinesthetic
  - Combination
  - Ask for responses in student's strong modalities
- Teach through student's strengths to ameliorate weaknesses
  - visual
  - auditory
  - tactile-kinesthetic
  - combination
- Test-related strategies
  - language
  - visual-motor
  - other

  Developmental Approaches

  - self-help skills
  - cognitive levels
  - affective levels
  - perceptual motor levels
  - others

Environmental Strategies

  - large group
  - small group - interest groups - skill groups - study groups
  - one to one - peer-cross age tutoring - self-instructional
  - learning centers
  - cubicles
  - seating arrangements, e.g. moving the student to the front of the room
  - other

Compensatory Strategies

- visual aids, e.g. filmstrips
- typewriters
- talking books
- cassette tapes
- calculators
- markers in reading
- others

Content Strategies

- sequential skills
- specific specialized approaches, e.g. VATK (Fernald)
- commercial materials, e.g. Goal Program (Milton Bradley)
- other

Cognitive Strategies

- concrete materials
- manipulative materials
- models (Example of a completed task)
- shaping (reinforcement for successive approximations of correct response)
- cuing (providing partial answers) or signals to possible responses
- probing (asking student to clarify answer- narrowing answers)
- molding (physically guiding student's movements)*
- chaining - teacher completes task in sequential steps
- practice (drill)
- mixed practice (practice on different task within one instructional lesson)
- modification of presentations, directions (e.g. one step instead of two)
- reinforcements - tangible - token - verbal - immediate - delayed
- contracts
- rate - extending time limits - strategies to encourage rate and accuracy
- other

Affective Strategies

- Behavioral approaches, e.g. behavior modification

Therapeutic Approaches

- life space interviews
- play therapy
- counseling
- small group discussions
- others

GOAL

STRATEGY

RATIONALE

ACTIVITY

GOAL

STRATEGY

RATIONALE

ACTIVITY

GOAL

STRATEGY

RATIONALE

ACTIVITY

GOAL

STRATEGY

RATIONALE

ACTIVITY

MONITORING AND EVALUATION TECHNIQUES MEASURE:

(1) STUDENT'S PROGRESS TOWARD STUDENT-CENTERED OBJECTIVES AND ANNUAL GOALS

(2) EFFICACY OF TEACHING STRATEGIES AND SERVICE DELIVERY PLAN

STEPS IN MONITORING AND EVALUATION PROCESS

STEP ONE

TEAM DECISIONS ON GOALS, OBJECTIVES, TEACHING METHODS, SERVICE DELIVERY PLANS

STEP TWO

TEAM DECISIONS FOR MONITORING AND EVALUATION STRATEGIES

STEP THREE

EACH SERVICE PROVIDER DESIGNS AND IMPLEMENTS SPECIFIC MONITORING AND EVALUATION STRATEGIES

STEP FOUR

MONITORING AND EVALUATION RESULTS ARE REPORTED IN QUARTERLY AND ANNUAL REVIEWS

MONITORING AND EVALUATION STRATEGIES

- INFORMATION GATHERING
- RECORD KEEPING
- ANALYSIS

DATA COLLECTION

DIRECT

- CRITERION-REFERENCED TESTS (Commercial and Teacher-Made)
- PROBES
- DIAGNOSTIC TEACHING LESSONS
- SYSTEMATIC OBSERVATION SYSTEMS
- COMMERCIAL WORKSHEETS
- UNIT TESTS

CONTINUOUS

- DAILY
- PERIODICALLY (e.g., three times per week)

3.14

TYPES OF RECORD KEEPING SYSTEMS

TALLY SHEETS

NAME ____________________

DATE ____________________

TIME ____________________

BEHAVIOR: Volunteering Information In Reading Circle

ACTION: Number Of Times Raised Hand

CODING SHEETS

H = HITTING
T = THROWING
P = PITCHING

12:00			12:05			12:10		
H	T	P	H	T	P	H	T	P

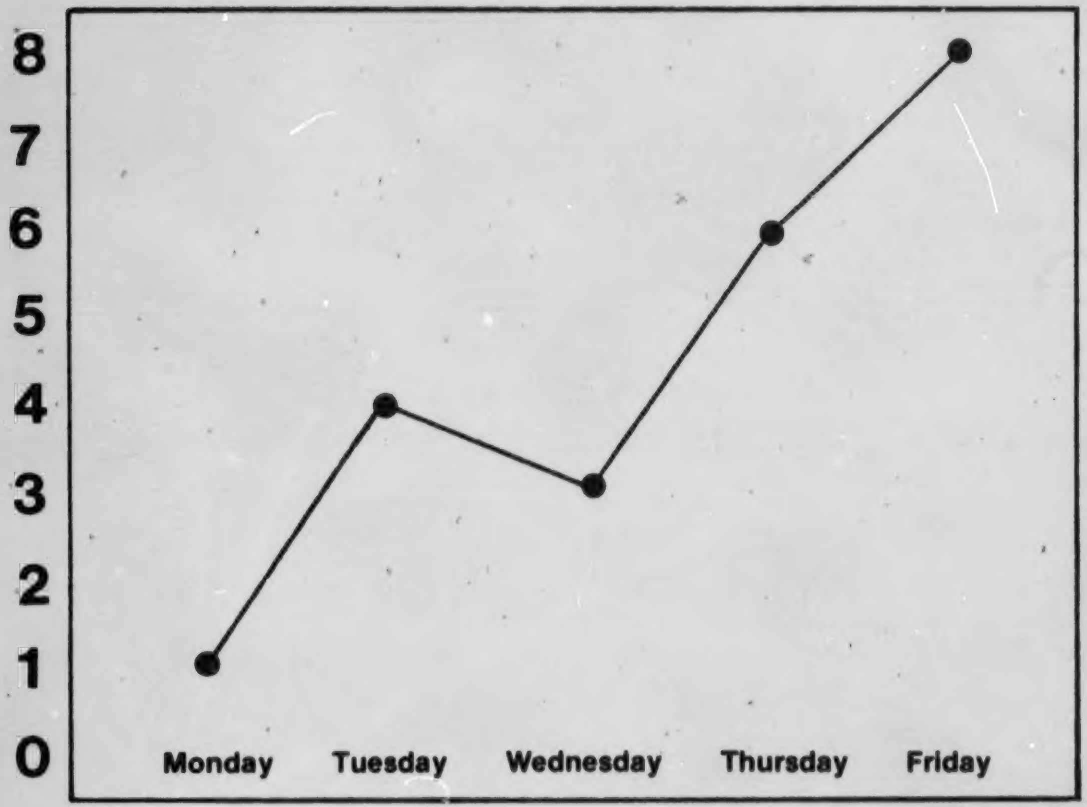
CHECKLISTS

WORD	M	T	W	Th	F
AT	-	+	+	+	+
MAT	-	-	-	+	+
CAR	-	-	+	+	+
MOTHER	-	-	-	-	-
CARE	+	+	+	+	+
SURE	-	-	-	-	-
IT	+	+	+	+	+
SAT	+	+	+	+	+
IN	+	+	+	+	+

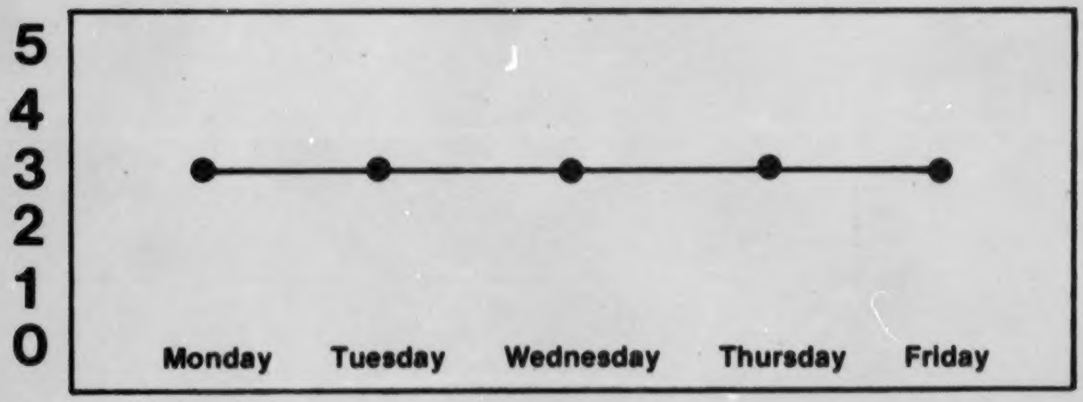
CHECKLISTS

MATH	MET	CANNOT
OBJECTIVE 1		
OBJECTIVE 2		
OBJECTIVE 3		
OBJECTIVE 4		

SPELLING WORDS



MATH FACT



ACTIVITY SEVEN: MONITORING AND EVALUATION STRATEGIES

Purpose

The purpose of this activity is to introduce you to the purpose and techniques for monitoring and evaluating a special student's individualized program.

Instructions

1. Choose a spokesperson to present your answers.
2. Review the four goals developed by your group.
3. Select a type of data collection for each goal. Place a check by your selection.

TYPES OF DATA COLLECTION

___ Criterion-referenced tests, goal #

___ Commercial ___ Teacher made ___ Demonstrations (e.g. oral reading)
Goal #

___ Probes, Goal #

___ Diagnostic Teaching Lesson, Goal #

___ Commercial worksheets - teacher made exercises (e.g. cloze paragraphs)
Goal #

___ Tests to accompany program, Goal #

___ Unit tests, Goal #

___ Teacher made tests, e.g. spelling lists, Goal #

___ Systematic observation systems, Goal #

___ Other (please describe), Goal #

4. Choose a method of recording for each method of data collection. Write the method beside the recording device. For example: graphs, systematic observation.

Charts ____________________

Graphs ____________________

Checklists ________________

5. Check how often the measure will be used to assess the student's progress.

Strategy One - Daily or after each lesson, two or three day intervals

____ Weekly ____ Monthly

Strategy Two - ___ Daily ___ Two or three day intervals

___ Weekly ___ Monthly

MAJOR COMPONENTS OF SPECIFIC OBJECTIVES

1. **THE CONDITION - (where, when)**
   A statement of the circumstances in which the behavior will occur.

   "Given 220 sight words on flash cards . . ."
   "During lunch period, seated with peers . . ."

2. **THE LEARNER - (who)**
   The individual who is to perform the behavior

   The student will . . . Susan will . . .

3. **THE BEHAVIOR - (what)**
   Exactly what you want the student to do. It is an observable, measurable, and repeatable activity

   walk say point to
   read draw sit

4. **CRITERIA - (how)**
   How well the behavior is to be performed before proceeding to the next task.

   ". . . 80% accuracy within ten minutes."
   ". . . without hitting or kicking for 5 consecutive days."

COMPONENTS OF A SPECIFIC OBJECTIVE

CONDITION LEARNER BEHAVIOR CRITERIA

While filing to the lunchroom
with his peers ____________________

Darrell ____________________

will walk ____________________

without hitting other students ____________________
for five consecutive days
as judged by two observers

ACTIVITY EIGHT: COMPONENTS OF STUDENT-CENTERED SPECIFIC OBJECTIVES

Instructions

Read each specific objective and determine what component(s) is(are) missing. Circle the number representing the missing component.

Components of a specific objective:

1. Condition
2. Learner
3. Behavior
4. Criteria

1. The teacher will present visually ten vowel sounds to the student.

   1 2 3 4

2. The student will be able to add correctly the number 1 through 20

   1 2 3 4

3. Given a list of ten vocabulary words, the student will know them with 100% accuracy.

   1 2 3 4

4. The student will orally respond to the sound of short "a" with 100% accuracy.

   1 2 3 4

5. Given visually on cards the word families, am, at, as, the student will respond.

   1 2 3 4

6. Given the words peninsula, shore, and island, the student will understand their meaning with 100% accuracy.

   1 2 3 4

7. Given the short sound "a" by dictation, the student will identify the correct vowel.

   1 2 3 4

8. Given ten geometric figures on a 5 x 8 cards, the student will know 8 out of 10.

   1 2 3 4

9. During a 20-minute recess period the student will enjoy playing with other students.

   1 2 3 4

10. Given a 30-minute reading class the student will not get into trouble with the teacher.

    1 2 3 4

ACTIVITY NINE: WRITING SPECIFIC OBJECTIVES

Purpose

The purpose of this activity is to provide practice in writing specific student centered objectives according to the criteria designated by the trainer of this workshop.

Instructions

1. Choose a group recorder.
2. Select four of the goals that you wrote for James. Write three to four specific student centered objectives for each goal. (Use the space below). Each objective should:
   a. Represent the student's terminal behavior at the end of each quarter.
   b. Specify the condition, the learner, the behavior and the criteria.

TYPES OF SERVICES

. . . BASED ON GOALS, INSTRUCTIONAL OBJECTIVES

. . . COMPREHENSIVE AND INTEGRATED

. . . LEAST RESTRICTIVE SETTINGS

CRITERIA FOR MOVEMENT TO LESS RESTRICTIVE ENVIRONMENT

. . . **MINIMAL ENTRY SKILLS** (INDEPENDENCE IN LEARNING)

. . . **ACCOMODATIONS IN LESS RESTRICTIVE ENVIRONMENT**

ACTIVITY TEN: TYPES OF SERVICE DELIVERY

Purpose

The purpose of this activity is to introduce you to the process for selecting the types of special services necessary for meeting the student's goals.

Instructions

1. Choose a group recorder.
2. Review your goals, objectives, and teaching strategies for James and decide what types of services are necessary to meet the goals and objectives. Fill out the service delivery plan, additional information and criteria for movement to the next less restrictive prototype found on page 73.

STUDENT PROFILE:

ADDITIONAL INFORMATION:

SPECIAL EDUCATION SERVICE DELIVERY: Type of Service	Focus on Objective Numbers	Type of Setting					Location	Personnel	Projected Date Service Begins	Frequency and Duration of Service per Day/Week	Total Hours per Week
		Class	Small Group	Individual	Regular	Special					
Total hours of special education service delivery per week											

241

242

CRITERIA for movement to next less restrictive prototype:

IF OTHER THAN REGULAR, state the annual duration of program ________ days, daily duration of program ________ hours, and transportation plan:

CRITERION TEST — MODULE THREE

PART ONE-COMPLETION

1. List the components of the Individualized Educational Plan (IEP)

    a. ______________________

    b. ______________________

    c. ______________________

    d. ______________________

    e. ______________________

    f. ______________________

    g. ______________________

2. The components of the student profile are:

    a. ______________________

    b. ______________________

3. How a student manages a task is part of the student's ______________ ______________________.

4. The current levels of performance state ______________________ ______________________________________

5. General Student Centered Goals include:

    a. ______________________

    b. ______________________

    c. ______________________

6. Monitoring and evaluating strategies should be ________ and ____________.

PART TWO: TRUE OR FALSE

1. ____ The student will increase his vocabulary is an appropriate goal statement.

2. ____ The IEP does not include specific teaching approaches and methodologies.

3. ____ Administering a group standardized test to assess a student's progress is an example of direct assessment.

4. ____ The current level of performance should indicate the student's entry level.

5. ____ How a student processes and retains information is included in the learning style.

6. ____ The statement "The student reads on a 2.0 grade level" is an appropriate statement for a current level of performance.

7. ____ The service delivery plan includes the type of setting.

8. ____ Goals statement should indicate the direction of change.

9. ____ The service delivery plan should be decided upon prior to development of goals and teaching strategies.

PART THREE - MATCHING

____ 1. Physical constraints

____ 2. Entry level

____ 3. Small group/large group/one-to-one

____ 4. Criterion tests

____ 5. Rate of learning

____ 6. Subtasks for goal statements

____ 7. Multisensory approach

a. Included in service delivery plan

b. Part of learning style

c. Specific Student Centered objectives

d. Part of student profile

e. Teaching methodologies

f. Part of current level of performance

g. Can be included in monitoring and evaluation strategies.

MODULE FOUR

THE INDIVIDUALIZED EDUCATIONAL PLAN: A TEAM APPROACH

PARTICIPANT'S MANUAL

INTRODUCTION TO MODULE FOUR

The purpose of this module is to introduce you to the decision-making process for the development of an Individualized Educational Plan (IEP). The organizational structure for developing the IEP is the Team approach. In this module, salient features of group decision-making processes are introduced via the use of case materials.

OVERVIEW OBJECTIVES

After completing this module, you will be able to:

1. Specify information considered necessary for the development of an Individualized Educational Plan;
2. Specify individuals to collect and/or review this information;
3. Evaluate the relevance and bias of the diagnostic information used in developing the IEP;
4. Formulate behaviorally-specific goals responding to the needs of the special needs student while utilizing the resources of the local educational system;
5. Identify the procedures to maximize information sharing and decision-making effectiveness among team participants;
6. Develop an IEP.

CRITERION TEST — MODULE FOUR

1. List four types of information that should be included in an assessment report.

   a. ______________ c. ______________

   b. ______________ d. ______________

2. Assessment information should come from multiple sources. List three of these sources.

   a. ____________ b. ____________ c. ____________

3. Bias can occur in assessment information. Give two examples of such bias:

   a. ______________________________

   b. ______________________________

4. MATCHING:

   ____ a. Inferential statements

   ____ b. Informational statements

   ____ c. Judgmental statements

   ____ d. Active listening

   ____ e. An agenda

   ____ f. Assumption of responsibility

   ____ g. Educational levels of performance

   1. A process skill
   2. Assist in goal clarification
   3. Statements based on quantifiable information
   4. A right stressed in assertiveness training
   5. Statements one step removed from the actual fact
   6. Should be developed at a group meeting
   7. Usually in the form of recommendations; statements about what action should be taken.

5. TRUE-FALSE:

   a. ___T ___ F Collapsed scores (e.g., grade levels) are sufficient information on diagnostic reports.

   b. ___T ___ F Major concerns of those referring the child should guide the assessment team in its information-gathering.

   c. ___T ___ F Assessment information should be relevant to program planning.

   d. ___T ___ F The type of information (e.g., norm-referenced tests) can influence the group decision-making process.

   e. ___T ___ F Very few tests are biased in their content.

f. ___T ___ F Assessment information should come from multiple sources.

g. ___T ___ F Group dynamics do not affect the completion of a task.

h. ___T ___ F Inferential and judgmental statements should not be used in diagnostic reports.

i. ___T ___ F Non-verbal communication is an important aspect of group dynamics.

j. ___T ___ F The level of participation in the group can affect the individual's satisfaction with the results of the decision-making process.

6. Match the following comments with the example of group process skill:

a. Mr. Doe, you said that you feel John is hyperactive. Can you give us examples?

b. M. Jones, I think you said that you don't understand John. Is that what you said?

c. Uhm huh. Another person is speaking.

d. The major points of this discussion so far seems to be...

e. M. Doe, that print is interesting but we are discussing...

f. Let's hold our discussion on this point to ten minutes.

1. Active listening
2. Redirecting comments
3. Summarizing
4. Clarifying comments
5. Probing
6. Controlling flow of the conversation.

AN OVERVIEW OF THE TEAM PROCESS

The rules and regulations of Chapter 766 and PL 94-142 emphasize the Team process as a means of gathering information concerning the needs of special needs students for developing IEPs. While it is assumed by many educators that the Team process is a more effective means of decision-making than a process which relies on individual decision-making, there is little information concerning the efficacy of the Team process as it relates to the development of IEPs for special needs students. The authors of these modules are convinced, however, that the Team approach can be an effective means of decision-making if certain components of the Team process are considered by all participants. In order to provide background information for the participants of this module, a discussion of the major concerns regarding the Team process and decision-making are presented.

The Team Process: Advantages and Disadvantages[1]

According to Drucker (1974), the Team approach has its advantages. He has stated:

> Everybody always knows the work of the whole and always holds him (self) responsible for it. It (the Team) is highly receptive to new ideas and new ways of doing things. And it has great flexibility (p. 567).

The Team approach, according to Drucker, is superior to a functional organization which can be described as a complex formal structure with simple work roles (Trist, 1969). In the functional organization, the individual is likely to make a committment only to his/her tasks and to have a limited number of varying social interactions on the job (Trist, 1969).

The Team approach, on the other hand, is a "composite system that combines a simple formal structure with complex work roles." This arrangement facilitates commitment to the "whole group task"; the individual participates in a number of tasks with different members of the group. (Trist, 1969, pp.273-4)

One disadvantage of the Team process is that while a school system can state that their participants in the IEP process comprise a Team, in reality, the members may not "function" as a Team. The Team may perform as a functional organization-i.e., the individuals may perform their tasks separately and may have little contact with the other Team Members prior to the formal meeting for developing an IEP for the student. Furthermore, each member could attend the meeting with little awareness of the activities and tasks of the other members. This lack of Team cohesiveness does not foster commitment to the whole group task of developing a comprehensive IEP for the student.

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[1] Segments of this discussion appear in Gillespie, P., A Planned Change Approach to the Implementation of the IEP Provision of PL 94-142. Department of Health, Education, and Welfare, Bureau of Education for the Handicapped, February, 1978.

Another disadvantage to the Team process is that it requires "continual attention to its management" (Trist, p. 567). The greater the possibility of multiple inputs (which is the case in the Team approach), the more likely that the group will have "divergent sub-group perspectives". (Perrow, 1972 p. 153).

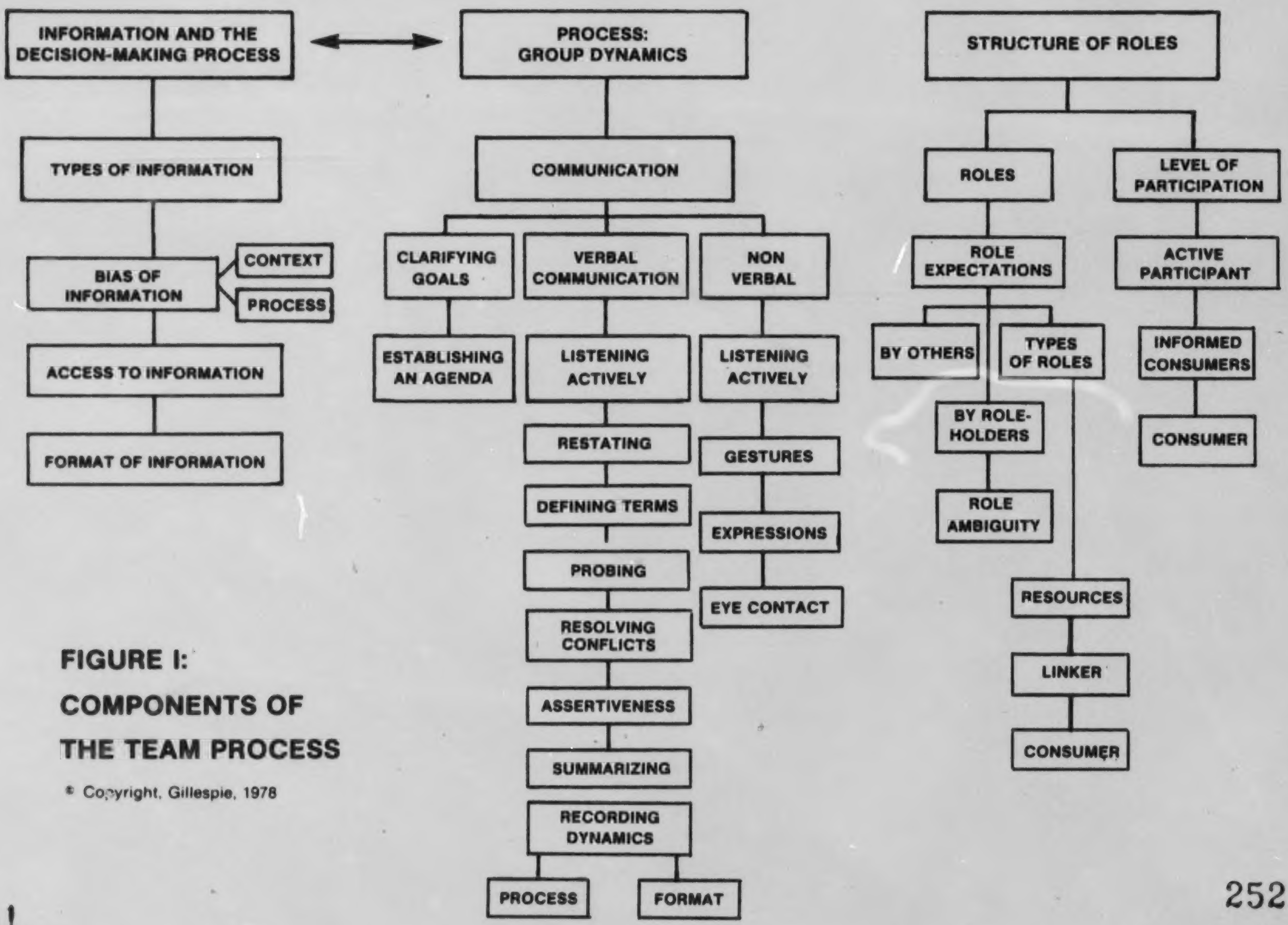
To insure comprehensiveness in assessment and programming, the Evaluation Team Leader must encourage maximum participation from the Team Members. Furthermore, s/he must continually monitor the activities of the group. Also, because the group may lack a sense of clarity or stability, its members must engage in constant discussions concerning the Team's purposes and procedures. Significant factors related to Team process, such as those mentioned here, are discussed in more detail in the following sections.

The Team Process: Components and Concerns

For a Team approach to be effective as a means for developing IEPs for special needs students, several issues must be addressed by Team Members. These factors, while all interrelated, can be discussed as separate entities: (1) information for decision-making; (2) the Team as a group process; and (3) the Team structure -- roles and level of participation. (See Figure I, page 3).

Information and the Decision-Making Process

The bases for decision-making are dependent, in part, upon the information (inputs) the group receives or collects concerning the needs of the student and the resources of the local education agency (LEA). According to Apter (1977), there are many potential problems with the information sources used in making decisions concerning the needs of special needs students. For example, referral may be inappropriate because of faulty observations, or referral is based on single incidents related to situationally-specific factors


INFORMATION AND THE DECISION-MAKING PROCESS
PROCESS: GROUP DYNAMICS
STRUCTURE OF ROLES
TYPES OF INFORMATION
BIAS OF INFORMATION
CONTEXT
PROCESS
ACCESS TO INFORMATION
FORMAT OF INFORMATION
COMMUNICATION
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BY OTHERS
TYPES OF ROLES
BY ROLE-HOLDERS
ROLE AMBIGUITY
RESOURCES
LINKER
CONSUMER
LEVEL OF PARTICIPATION
ACTIVE PARTICIPANT
INFORMED CONSUMERS
CONSUMER

FIGURE I:
COMPONENTS OF
THE TEAM PROCESS

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rather than general patterns of the student's behavior. Diagnostic information may be inappropriate, inadequate, or incomplete. Many of these concerns are presented here.

NATURE OF INFORMATION

The nature of information can significantly affect the decision-making process. In establishing the needs of the student, the Team should examine carefully the types of information provided, the sources for such information, and its completeness.

Goldbaum and Rucker (1977) have demonstrated that the nature of assessment data can affect the programming decisions for special needs students. Through the use of case studies, child study Team Members were asked to make placement and programming decisions for handicapped children. The results from this study were:

> (a) child study Team Members place handicapped children in more segregated settings utilizing normative rather than criterion-referenced data; (b) clinically trained Team Members place handicapped children in more segregated settings than educationally trained members; (c) educators have more confidence in criterion-referenced data and feel it is more useful for making recommendations to teachers; and (d) clinicians have more confidence in normative referenced data and feel it is more useful for making recommendations to teachers (p. 70).

This bias in terms of assessment data has far-reaching implications for the Team decision-making process. Participants may perceive information in terms of their own experiences without assessing the needs of the student. For example, if an evaluator uses only normative standardized data, s/he will be more likely to "see" only the data reported on these tests. Norm-referenced assessment is usually conducted outside the student's environment and is often divorced from the student's total life experiences. Unless the total environment of the student is assessed, information will be incomplete and biased. One solution to this problem is to collect data from multiple sources (home, school, peer groups, perceptions by student) and to use various means for this data collection (norm-referenced and criterion-referenced tests, rating scales, interviews, formal and informal observations, checklists, etc).

BIAS IN INFORMATION

Recently, much has been written concerning the bias of our information for decision-making process (Mercer & Ysseldyke, 1977; Ysseldyke, 1978; and Mosley, 1977). Standardized instruments have been cited as unfair to minority group students because the reference groups upon which the tests were standardized are not similar to the background experiences and opportunities of minority students (Ysseldyke, 1978 and Mosley, 1977). If standardized instruments are used to assess students who have not been part of the reference group, examiners must evaluate the appropriateness and relevance of the data. Such procedures as examining the technical adequacy of the tests (including descriptions of the norming population) and the item content in relationship to the student's experiences. English language patterns, dialect, and vocabulary of his/her cultural group must be considered.

BIAS IN INFORMATION GATHERING

Several investigators have noted biases in the gathering of information *per se* (e.g. Mosley, 1977; Ysseldyke, 1978). Ysseldyke states:

> I have noted that evidence is mounting to support the contention that naturally-occurring pupil characteristics affect the assessment decisions made for and about children. I firmly believe that naturally-occurring pupil characteristics such as race, sex, physical attractiveness, socioeconomic status, and parental power have a tremendous effect on who is referred, the settings to which the pupils have been assigned, and the particular kinds of instructional programs they receive. Educators must, individually and collectively, examine the extent to which the decisions they make are, in fact, biased decisions.

Mosley (1977) in reviewing the literature on bias in testing, notes that "it is believed that white examiners tend to have a negative effect on test scores of minority examinees".

In examining information presented for Team decision-making, the Team must be informed of the procedures of assessment as well as the results. The limitations of the testing, the environment in which tests are administered, the examiner's sensitivity to culturally-related differences in the language of the student, the administration of the test in the student's own language and so forth are types of information that should be considered by members of the Team.

FORMAT OF INFORMATION

Most of us in special education are familiar with "diagnostic report" formats. We, as specially trained individuals, have been steeped in the terminologies of our respective professions. Often, we use these terms indiscriminately in our diagnostic reports. This practice may result in confusion for parents and other professionals who attempt to understand and utilize the contents of our report. Furthermore, written and oral reports are presented without addressing the reasons why particular procedures and tests were administered. Results are presented in the order of tests administered rather than presenting the steps used to gather data, in order to investigate the major concerns or hypotheses of those requesting the information. If information is to be used by all members of the Team, it should be presented in a clear, concise format that follows some rationale. If technical terms must be used, the diagnostician or programmer should define these terms for the Team.

TYPES OF INFORMATION

Important to the presentation of information is the recognition by the diagnostician that some of his/her statements will be informational while others will be inferential or judgmental (Moran, 1976).

Informational statements are based on behavior that has been quantified, e.g., a full scale I.Q. of 105. Most informational statements will be based on information gathered from norm and criterion referenced test data.

Inferential statements are statements based on the "unknown on the bases of the known". (Moran, 1976, p. 9) For example, such statements "auditory processing deficits are the cause of John's difficulty in reading" are based on inference rather than known information. These types of statements occur frequently in diagnostic reports. Although inferential statements are a legitimate form of communication, participants must be aware of the limitations of such statements and not confuse them with informational statements.

Judgmental statements are statements based on a "decision about what action should be taken" (p. 10). In diagnostic reports, judgmental statements are represented in the recommendations. Moran describes the limitations of such statements:

> Judgments are based upon inferences which are in turn based upon your information; therefore, judgments are twice removed from fact and error is subject to compounding effect. Any judgment can be only as sound as the inferences and information on which it is based. (p. 10)

Team Members must be aware that information presented to the group may be based upon the perceptions, background, and experiences of the presenters. All information should be considered carefully as to its relevance to the immediate need of the student.

In summary, to ensure fairness in the decision-making process, the Team participants must consider the completeness of the information presented, the processes for gathering information, the content, the biases, and the format for presenting this information. Information that reflects the total life experiences of the student may insure that the student's needs will be adequately met by the public or private educational facility.

Process and Group Dynamics

The gathering of complete, appropriate information may lose its significance if a process is not established for effectively sharing the information. Members of the Team, especially the Team Leader, must attend to the dynamics of the group process in order to ensure that appropriate decisions concerning the student's needs are made. A discussion of the components affecting group process and some of the results of these dynamics in the programming for special needs students follows.

GROUP PROCESS

Typically, group dynamics refers to the "study of individuals interacting in small groups" (Luft, 1963). The dynamics of a group is the description of the complex interactions that are interdependent and common to a particular setting or task (Luft, 1963). There are many reasons why individuals form groups; for example, individuals who have a common concern about an issue or problem may form a group to develop solutions, e.g. feminist groups, anti-abortion groups, etc. Groups may be formed to assemble individuals with various capabilities to investigate a problem and to propose solutions to those who have the power to implement these solutions (Phillips & Erickson, 1970). Other reasons for the formulation of groups may be developing policies on public issues, or dealing with problems as they arise (e.g. long-standing committees), or for preparing an implementation plan for designating policies (Phillips & Erickson, 1970).

The Evaluation Team formed to develop an IEP for the special needs student probably represents the second reason cited- i.e., a group of people with various professional capabilities who meet to investigate a problem and propose solutions to possible implementers, e.g. the teacher and the parent. This Team engages in group problem solving to determine the needs of the special needs student and the possible programs for meeting these needs. The success of this group problem-solving process may depend upon such factors as effective verbal and non-verbal communication among members, as well as the effectiveness of the session leader in establishing clear goals, facilitating conflict resolution, and summarizing the interactions of the group.

VERBAL AND NON-VERBAL COMMUNICATION

How a group communicates its information, perceptions, goals, needs and desires, verbally and non-verbally, can affect the decision-making process. Also, how the Team Leader facilitates such communication may affect the success of the completion of tasks by the group.

GOAL CLARIFICATION

When a Team is formed to discuss the needs of the student, one of the most important aspects is the clarification of goals. On this topic, Luft has written:

> If goals are shared, there is a greater likelihood for cooperative effort; when the group goal is not shared by members, morale and productivity may suffer. Consequently, when the goal is decided upon by group discussion and participation, there is greater likelihood of full member involvement (p. 20).

According to Fenton, et al (1978), goal clarity has operational implications for the Evaluation Team Meeting. If the Team fails to recognize assigned goals, they are not likely to attend to the activities needed to make appropriate placement decisions for the student. Furthermore, a lack of goal clarification may hinder the group efficiency in the decision-making process. Incongruent perceptions of goals may result in time spent on tangential matters, "nit picking", and so forth.

In their study of the perceptions of goals and placement teams, Fenton et al., found that not all Team Members have an accurate idea about the scope of the Evaluation Team's responsibilities (page 8) and that the role of the Team Member affected the perceptions of his/her duties as a Team Member.

They suggest steps to assure that Team Members engage in goal clarification. For example, at the beginning of the meeting, the Team Leader with the input of every participant, can develop an agenda to guide the discussions among the participants. Goals for the meeting should be clear to all participants. The session leader may need to restate concerns in order to ascertain that all participants have a clearer understanding of the tasks and responsibilities of the group and of each individual. Also, the session leader can summarize the results of decisions made by the group and assume the responsibility for having the session's decisions concerning its duties and activities recorded by tape or by rotating Team recorders.

VERBAL AND NON-VERBAL INTERACTIONS SKILLS

Some professionals may have difficulty in small group interactions because they do not recognize the difference between speaking to a group of individuals who are required to listen and a group of individuals who "are entitled to talk back whenever they choose" (Phillips & Erickson, 1970). Diagnosticians who read their entire diagnostic report before the group rather than summarizing major concerns and directing their comments to specific individuals, are treating the Team Members as an audience rather than as partners in the decision-making process.

Verbal interaction that facilitates an interchange of ideas and concerns requires special attention by all Team Members, especially the Team Leader.

One of the most important aspects of verbal interaction is that of active listening. Active listening takes time and attention by all involved. Luft lists some specific questions for consideration by the listener:

> Do I understand literally what the other person is saying? To whom is the comment addressed? What is the speaker's frame of mind? What are the feelings he wishes to convey? Do I understand what he wants to get across? Do I understand the feelings and ideas he is actually expressing, whether or not he is aware of these? Can I respond to what the speaker is intending to express? Am I aware of the context in which the comment is made? Am I aware of particular difficulties in my comprehension of certain individuals or of communication under certain circumstances? (pp. 26-27).

An important component of active listening for the group is the continual checking with each member to insure that all in the group understand what is being communicated. If the session leader restates, paraphrases, and requests Team Members to do the same, clarification of communication should be enhanced. This is especially important if Team Members are using terminologies that other members may not comprehend. The Team Leader must continually be aware of junctures in the discussion where it is necessary to clarify information.

Non-verbal communication is important to the process of active listening. The active listener may indicate by his/her gestures that s/he is listening, e.g. by leaning forward, nodding his/her head, making eye contact, etc. Body cues can indicate subtle responses of individuals. Such gestures as looking down or away, rustling through papers, and watching one's watch can indicate to the speaker that the individual exhibiting such cues is not actively listening. Other cues such as frowning or smirking indicate to the speaker that the listener is not pleased with the speaker's comments. Active listening can facilitate the speaker's ability to identify and clarify his/her problems, perceptions, beliefs, and values (Roth, 1975).

Other verbal interactional skills used by Team Members, especially the Team Leader are probing, summarizing, and resolving conflicts, and redirecting the discussion. Often, some Team Members are reluctant to share information, perhaps due to a lack of confidence. Also, some members do not realize that other Team Members may need a thorough explanation of information presented: for example, explaining to the parent what a Language Master is. In such cases, the Team Leader may need to ask probing questions in order to elicit further information from that speaker. These questions, for the most part, should be open-ended ones rather than those that require a yes-no answer. "Yes-No" questions tend to stifle conversation (Possien, 1969).

As topics are discussed and issues are resolved, the Team Leader should summarize the salient features of the discussion. Asking the recorder to write these points on newsprint will help the group in monitoring decisions made and in keeping on tasks, as well as in seeing the results of its efforts. A permanent record of these summaries should be kept by the session leader.

The Team Leader may need to redirect the discussion, especially if one point is belabored rather than presented clearly and concisely. Group members may have a tendency to wander off tasks and discuss tangential issues. Each member may have his/her own "bone to pick", and the Team Leader must assume the responsibility of keeping the discussion flowing and directed toward the tasks outlined by the group at the beginning of the meeting. The group may have decided approximately how long each topic will be discussed, and the Team Leader may need to remind the group of its time committments.

Within any group, it is probable that conflict over some issues may arise. The Team Leader should anticipate these conflicts and decide what means s/he will use to resolve them. Ideally, the resolution of conflict should be the "integrating of opposing ideas toward solutions" (Luft, 1964, p. 21). If the Team Leader is concerned about the feelings of all individuals and the right of all individuals to express their feelings, the resolutions of conflict will be more readily accomplished. The Team Leader should assist each participant in clarifying the specific points of disagreement and in seeing possible points upon which those in disagreement may agree. Perhaps, those involved in the conflict may need to search for new solutions agreeable to all members.

ASSERTIVENESS IN VERBAL INTERACTIONS

While a Team Leader may attempt to ensure that every participant has the opportunity to express his/her own feelings in a group meeting, each participant must ultimately assume the responsibility for his/her own behavior. An individual cannot blame others for his/her reluctance to participate and express his/her thoughts.

Assertiveness in expressing individual opinions is currently a topic for investigation. Many interest groups and organizations are now training their members to be more assertive. One of the popular references on assertiveness training is by Smith (1975). He presents several basic rights of individuals to be considered by those who desire to be more assertive. Several of these rights can be applied to the evaluation or child study Team process. These rights are summarized here:

(1) "You have the right to disagree, negotiate, and/or compromise." (Smith, 1975, p. 28). This right is often violated by relationships that are based on positions of authority. In many instances, among the professionals in mental health, certain individuals assume some authority or power based upon "their knowledge", "expertise", and "training". This assumed power places all those around them in a position of helplessness. These "defined roles and organization" imposed upon individuals regulate the actions of all involved. For example, the school psychologist and/or any diagnostician may be viewed by the school system as being in the position of power (e.g. given the right to administer value-laden instruments and make judgments about individual's behavior), with the parent or the teacher receiving information and judgments. While due process affords the right to appeal decisions by those in power, the dynamics of interactions among these individuals (professionals and laypersons) are still affected.

However, according to Smith, if people feel helpless or manipulated by authority, they have only themselves to blame. It is the responsibility of the individual to assert his/her opinions and feelings in group situations. If s/he does not, s/he cannot blame "those in authority". Therefore, a parent or a teacher should not leave Evaluation Team Meetings feeling dissatisfied because s/he was not afforded the opportunity to participate. Rather, s/he must be more assertive, especially if s/he has crucial information to offer concerning the student's needs.

Smith states that relationships can exist between equals if "There is no initial structure imposed upon either person's behavior beforehand". He describes this relationship:

> All structure of this type of interaction is evolved as the relationship progresses through compromises that work. These mutually agreed upon compromises (structure) are practical ones; they allow the business of the relationship to be carried on without daily negotiation of who does what and when (p. 36).

Ideally, this type of relationship should occur in the Evaluation Team Meetings.

(2) "You have the right to change your mind" (Smith, p. 53). In an era of legal accountability, this right may be rejected by professionals. Too often, we develop programs that are permanent solutions from the start. We have no way of knowing whether or not something will work until we try it. Evaluation Teams should consider solutions as tentative and develop means for changing strategies when necessary.

(3) "You have the right to make mistakes and be responsible for them". (Smith, p. 54). There is nothing wrong with an error; we all make them. Errors of judgment are quite common in the area of assessment and programming for special needs individuals. An Evaluation Team should realize that all assessment information is tentative; diagnosticians should acknowledge this fact if implementation strategies reveal information that contradicts initial assessment. Assessment is a continual and on-going process--not a one-shot occurrence.

(4) "You have the right to say 'I don't know'" (Smith, p. 57). We, as professionals, can't know everything about a student's behavior; furthermore, we shouldn't be expected to know all. Learning is a very complex phenomenon. Often, we must experiment with strategies in order to determine the appropriate ones. A monitoring and evaluation plan assists us in obtaining feedback concerning our decisions.

(5) You have the right to dislike others. Professionals and parents don't necessarily have to like each other to work together. A professional offers equal services to all regardless of his/her preferences.

(6) "You have the right to say 'I don't understand'" (Smith, p. 61). Often we are intimidated by experts and technical language. In order to be well informed about student's needs, parents, teachers, and other professionals must be willing to admit that they do not understand all the technical terms used by various fields. Also, we cannot always understand a problem by "testing it." Often we must explain to the student, the parent, or the teacher that we don't understand exactly what is happening in a particular situation. This admission may enable them to assist in solving the problem.

TECHNIQUES FOR ASSERTIVENESS

Smith lists several techniques for becoming more assertive. Briefly, these are:

(1) Be persistent. Smith states:

> One of the most important aspects of being verbally assertive is to be persistent and to keep saying what you want over and over again without getting angry, irritated, or loud (p. 74).

(2) Be willing to compromise. If you feel your self-respect questioned, you may be able to offer a workable compromise (p. 84). The individual is not always going to achieve his/her goal, especially if many are involved in the decision-making process. Compromises that work for all individuals are better than disagreements.

(3) Cope with criticism by admitting to some of your mistakes. There may be some truth in the others' criticism. Be open to dealing with these truths. Also, realize that criticisms of you may be based on the other individuals' biases. Try to separate these biases from your own perceptions of your behavior.

In summary, one of the most salient features of assertiveness is that ultimately we are all responsible for our own behavior. A team of individuals cannot blame others for their inability to express their opinions and to share important information. Each member must accept the responsibility for achieving maximum participation in the group's decision-making process. Verbal and non-verbal communication in group decision-making is an important component of the Team process. Team Leaders should take an active part in seeing that all Team Members participate in group discussions, that goals are clarified from the outset, and that decisions made by the group are clear to all Team Members.

Structures and Roles in the Group Process[2]

STRUCTURE

Group decision-making can be affected by the structure of the group i.e. the participants selected to be involved as Team Members may influence the input upon which the group bases its decisions. The boundaries of the interrelated systems represented at the meeting are defined by the individuals present. For example, if an administrator is at the meeting, a Team may have more access to information concerning LEA resources, than a Team that does not have an administrative representative.

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[2] Segments of this discussion appear in Gillespie, P.H., A Planned Change Approach to the Implementation of the IEP Provision of PL 94-142. Department of Health, Education, and Welfare, Bureau of Education for the Handicapped, February, 1978.

Such participants as an LEA representative, a member of the Evaluation Team, a regular classroom teacher, a special class teacher, the parents, and the student (when appropriate) provides input which affects decision-making. One critical assumption concerning the appropriateness of the decision made by the Team is that the Team has access to information concerning both the needs of the student and the resources of the school system available to meet these needs. If one of these components is missing, the Team will not have adequate information upon which to base its decision.

Typically, it is the LEA representative's responsibility to provide information about present or possible alternative delivery systems on the local, regional, and state level. The success of the decision-making process will depend, in part, upon the capability of the interrelated systems (diagnostic services, special and regular education program alternatives, community agencies, and so forth) to develop or coordinate resources to meet the needs of the special needs individual. The LEA representative can play an important role in this process. This individual should have an awareness or an access to the internal and external resources of the system which should extend beyond the LEA and into the community. For example, in a community special education model (Apter, 1977; Wirtz & Seay, 1974), the emphasis is on comprehensive coordinated services as defined by that community.

Such participants as the student's teacher (regular and/or special) can provide information concerning the student's specific needs as well as information concerning the characteristics of the environment in which the student has interacted or may interact. Crowell and Rucker (1977), in writing about the Evaluation process simulated case materials, found that regular class teachers can provide much valuable information concerning interactions of the student in the regular class setting as well as information concerning the educational needs of the student. In a study of role expectations in the Team process, Fenton et al, (1978) found that regular teachers participated less in Team activities and were less satisfied with the group process and the decision of the Team than other Team Members, e.g. the diagnosticians. Special and regular teachers input in the IEP decision-making process is important; teachers are more effective programmers of instruction for the special needs persons if they are integrally involved in the development of the IEP (Agard, Kaufman, Semmel, 1973).

Equally important as the teacher's input, is the input of the parents and the student when appropriate. The parent can be a valuable resource concerning the student's behaviors, needs, and responses to prior interventions by the school and community agencies. The student, the ultimate source of information, should be involved when appropriate. If the special needs student can express his/her likes and dislikes, make choices, engage in logistical operations and have a significant part of the implementation process (e.g. contracts with teachers), s/he should also participate in the development of goals, objectives, service delivery plan, etc.

As stated in the section on types of information, a member of the Assessment Team should be present to inform participants of the assessment procedures and contents. Ideally this individual should be able to integrate assessment information with programming decisions.

Roles

According to Luft (1964), the "concept of role means a pattern of behavior which characterizes an individual's place in a group" (p. 22). An awareness of the individual's role is useful in predicting the individual's behavior in a group. An analysis of roles can be presented according to types of roles, role expectations, and role identities in the Team process.

TYPES OF ROLES

In the Team process for developing IEPs, the individual may play several roles. For example, s/he may be considered as a resource for information in the group. A diagnostician often plays this role in the development of IEP s; however, the classroom teacher, the parent, and the student can also fulfill this role. The LEA representative can be a resource concerning information about services available.

An individual may have the role of linker or linking agent within the Team. Such personnel as the special administrator, resource teacher, consultant teacher, or regular educational administrator, may often play this role. For example, an individual can be aware of many services available to the system and will link the special teacher and/or parent to these. Parents, teachers, diagnosticians, and the student may also function in this role; however, most often, such a role is fulfilled by the administrator or consultant teacher.

The role of the consumer may be played by several members of the Evaluation Team. Typically, the parent, regular and special classroom teachers function in this role, i.e., they receive the diagnostician's opinions of the student's needs and the LEA representatives opinions concerning the necessary services. The consumer responds by either "buying into proposed services", rejecting the services, and/or "shopping around for better offers". The parent, the teacher, or the student when appropriate, will not be able to make appropriate decisions if they are not adequately informed as to all the information available to the diagnosticians and LEA representatives. They must be informed consumers.

Ideally, all participants in the Team should be able to play all three roles - resource, linker, and informed consumer. Typically, the parents and the teachers are informed of services and diagnostic information. They are expected to react rather than to be integrally involved in the data gathering and decision-making concerning the goals, objectives, and other procedures for the IEP.

ROLE EXPECTATIONS

Each member's position in the group reflects expectations of the individual's role by that individual and by the other members of the group. For example, the school psychologist is expected to provide diagnostic information while the school principal may be expected to be the leader of the group (Fenton, et al., 1978) On this topic, Fenton et al., write:

> Role expectations, are communicated formally and informally to members by the other members on the Team. A member may be asked by a Team Leader to perform a particular function for a Team or a Team may influence a member's behavior by sending covert affective messages implying acceptance or rejection of a particular behavior.

> Role ambiguity sometimes arises when there is an insufficient consensus of information about the duties, authority, and responsibilities that are appropriate to a particular role. Two types of role ambiguity identified by Sarbin and Allan (1968) are (a) disagreement among members fulfilling a given role and,(b) disagreement between others' expectations for a given role and the expectations of the members fulfilling that role.

According to Fenton et al (1978), role ambiguity among Team Members may inhibit active participation on the part of some Team Members which will in turn result in their lack of commitment to the decisions of the group. Role ambiguity on the part of the school staff and the parents concerning the parent's role in the Team process is a major problem in the development of appropriate IEPs for the student. Furthermore, school representatives are not sure as to the role of the student and the regular class teacher in the decision-making process.

In a study of placement Team Members' perceptions of roles, Fenton et al (1978), found that members reached consensus about the one activity for school psychologists (diagnostic) and special education teachers (prescriptive) and two activities for principals (maintenance and administrative). No activities were viewed as appropriate for regular teachers by 75% of the Team Members in other roles. They also found that some Team Members fulfilling certain roles did not agree with other Team Members concerning the activities related to their respective roles.

If Team Members are to function effectively as a group, role clarification and role expansion is necessary (Fenton et al, 1978). Unfortunately, the Evaluation Team that meets infrequently may not have the opportunity to do this. On the systems level, the Team Leader should coordinate meetings that enable representatives of various groups to meet to discuss each other's roles in the decision-making process. On the case level, the session leader may ask each participant what s/he feels is his/her responsibility, skill and/or possible contributions to the group. Moreover, if the Team Leader encourages maximum participation by all members, participants may feel comfortable expanding their roles within the group.

Another related problem is ambiguity of role identity by participants. Do individuals see themselves as members or representatives of the diagnostic unit, administration, support personnel, and so forth; or do they see themselves primarily as members of this decision-making group. "The more strongly members identify with sub-groups, the greater likelihood that their goals are differentiated" (Fenton, et al, 1978, p. 10). If goals are shared, there is a greater likelihood of group cooperation (Luft, 1963). Again, the process of goal clarification is extremely important to the effectiveness of the group's decision-making process.

LEVEL OF PARTICIPATION BY GROUP MEMBERS

Not all members of the Team will feel that they can participate on the same level as the other members of the Team. This is unfortunate because in order for changes to be effective, all members at all levels of the institutional hierarchy must take part in the fact-finding and diagnosis and subsequent formation of goals (Benne & Birnbaum, 1969). As stated earlier, too often parents, the student and the teachers are allowed to participate only by reacting to the information gathered and synthesized by members of the school staff. Levels of participation can begin with consumer, and extend to informed consumer, and then to active data gatherer and decision-maker. Parents, teachers, and student should be afforded the opportunity to gather data concerning the definition of the problem and the possible solutions. The more involved these individuals are in the entire process, the more commitment there will be in the implementation of the IEP.

Summary

In this paper, an examination of the components of the Team process was presented. Such factors as the relationship of information, the group process and the structure of the group decision-making process were discussed. In order for the Team approach to be an effective means of developing IEPs for special needs students all these factors must be considered by the Team Members--especially the Team Leader. Group decision-making is a very complex process and must receive considerable attention by the policy makers within the local educational agency. The process can result in either a reluctant initiation of the development of meaningless forms and documents, or an exciting interchange of resources by the Team involved. (Gillespie, 1978).

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4.1

CRITERIA FOR BEHAVIORALLY-SPECIFIC QUESTIONS

1. QUESTIONS SHOULD BE BASED ON THE MAJOR CONCERNS EXPRESSED IN THE REFERRAL.
2. QUESTIONS SHOULD BE WRITTEN IN CONCISE, CLEAR LANGUAGE, USING DESCRIPTIVE TERMS AND SHOULD AVOID TECHNICAL LANGUAGE.
3. QUESTIONS SHOULD BE STATED IN TERMS OF STRENGTHS AND WEAKNESSES IN AREAS OF CONCERN RATHER THAN IN TERMS OF COLLAPSED SCORES ON TESTS.
4. QUESTIONS SHOULD BE RELEVANT TO POSSIBLE PROGRAMMING SUGGESTIONS.
5. QUESTIONS SHOULD NOT BE BASED ON BEHAVIORAL OBSERVATIONS.

ACTIVITY ONE: THE REFERRAL

Purpose

The purpose of this activity is to introduce you to the concept of "Referral" as part of the decision-making process. You will be asked to:

1. determine major concerns expressed in the referral;
2. develop behaviorally specific questions to guide assessment;
3. identify those persons to address these questions; and
4. list the most appropriate tool to gather information to answer the questions.

Instructions

1. Select a group spokesperson
2. Individually read over the referral on pages 28-31.
3. If necessary, use the glossary on page 56-57.
4. As a group, complete the worksheet on page 32-33. The group spokesperson should be prepared to present the group's answers to the Team Leader if necessary.

766 REFERRAL FOR EVALUATION

Date: 9 / 30 / 78

DOB: 5 / 25 / 65

Student's Name	Smith	John	A
	Last	First	M.I.

Address 77 Freeland Street, Boston, MA 02199

Parent/Guardian (full name) Mr. & Mrs. Ralph Smith Tel. #303-607-2956

Primary Language of Home English

Present School Ferndale Teacher Mrs. Gwen Nelson Grade -7 Rm. # 203

School Last Attended Meadowbrook

Who Last Discussed This Problem with the Parents Mrs. Gwen Nelson

Date of Contact with Parents September 25, 1978

COMMENTS OF REFERRING PARTY

John is having problems adjusting to the junior high environment. Although I have tried to help him through in my English classes, I feel that he needs additional assistance and/or a different environment.

Signature of Building Administrator ______________________ Date 9/30/78

- -

Date referral received by Evaluation Team Chairperson Designee 10/5/78

Date letter of notification sent to parents 10/8/78

Date referral activated 10/20/78 Date of Evaluation 10/24/78

Address, names, telephone are fictitious

PRE-REFERRAL DOCUMENTATION

Report Submitted by Mrs. Gwen Nelson, English Teacher
September 26, 1978

This is John's first year in junior high school. He is having a great deal of trouble interacting with his peers, myself, and other teachers. He is not able to "keep up with the class" in music, gym, and social studies, in addition to failing all his academic subjects including my English class.

John is very hyperactive, has a very short attention span (usually no more than five minutes at a time), and has great difficulty sitting still through forty-five minute periods. I have to speak to him repeatedly and even threaten him with detention to try to get him to stop fiddling with his papers and talking to his neighbors.

In my class, John appears to be distracted by extraneous noises and is constantly stopping work to listen to, or to determine the origin of the noises. In one forty-seven minute period, I noted that John interrupted his work activity (a twenty minute independent study session) fifteen times. These interruptions were to look up at other students, to look out the window, to look out into the hall, to sharpen his pencil (three times) and to look over other student's shoulders at their work.

Consultations with Parents and other Professionals

I called John's mother and father on September 25, 1978 to discuss John's problems in my English class. They report John expresses his fear of failing the seventh grade. He doesn't want to be left behind his friends. He is having nightmares about being punished by his teachers. He has told his parents that the courses are too hard. They said that the assignments John brings home this year are too difficult for him to complete as he cannot read, spell or write well enough. He liked it better when he was with fewer teachers. The parents are very concerned about John and wonder if his past history of seizures is contributing to the problem and if he is "smart" enough to attend the seventh grade.

John attended a transitional first grade. He was held back in third grade to give him a chance to "catch up". He received remedial reading help in grades 2-5. The parents say that the assignments John brings home look too hard for him to read. They feel that he cannot write or spell well enough to complete his work. In the elementary grades, John was given work below grade level for him to do. Now faced with his problems adjusting to seventh grade both socially and academically, they would like an assessment of John's needs.

John's parents told me that doctors told them seven years ago that John would eventually outgrow his petit mal seizures. John has a younger brother with reversal problems who receives remedial reading help but who does much better academically than John. John's older sister in the ninth grade has had reading problems but is doing fine academically. John's twin brother has had no academic problems in school.

I spoke with John's sixth grade teacher. She said she has several "slower" students like John and has her class divided into three homogeneous groups. She graded John according to how well he did on his assignments which were on a third and fourth grade level. On his report cards, there was no explanation that his B's and C's were based on individual work levels and not grade level work.

When I have talked to John, he says he is very unhappy at the junior high school. He is afraid he will stay back again this year. He does not want to attend his other classes because he says he cannot do the work. He says the words in the books are too hard for him.

After speaking with John and his parents, I consulted with his other teachers and the principal. All of John's teachers and the principal feel that he may need another environment until we can, with the help of specialists, assist him in adjusting to the junior high environment. Our principal also told me that John has been sent to detention at least twice a week since school started. She has had complaints from most of John's teachers regarding his behavior and his academic needs.

John has problems in all his classes understanding verbal directions and reading written instructions. He also has problems writing responses because of spelling and handwriting difficulties (an example is attached at the end of this report).

Influencing Factors

I feel that John's problem understanding what is said or written, his present level of academic performance and his hyperactivity are all contributing to his difficulties in adjusting to the junior high environment. He reports he has had seizures in the past but I do not know the effects this would have on his present problems. The class requirements are more difficult than those during his elementary years. His fear of failing another grade is also a contributing factor to his anxiety over his assignments.

Classroom Modifications and Teaching Strategies

I make up shorter, easier worksheets for John. This is successful only if John is interested in the materials (see attached sheets). I have given him reading books on his level but he expresses embarrassment to be doing work that is so different from everyone else. I moved John to the first row so his desk is closer to mine and the blackboard, but this has not helped him to pay attention. As the work gets harder, John seems to get more confused and upset.

The physical education teacher has set up a buddy system to help John understand directions for games and exercise. John's other teachers have implemented similar strategies without success.

HANDWRITING EXERCISE

(Write the answers in your best cursive. Check the board for the letter formations.)

Johnny Bench is a Catcher.

Reggie Jackson hit homeruns in the World Series.

There are nine positions on the baseball team.

The Yankees won the World Series in 1977.

POSSIBLE ANSWERS: nine
Yankees
homeruns
catcher

John's skunk story:

Gan was in the slyn wrn she hed a
pip at the bat doorand I got up to
see owl was sen a pec I bat
yep rever come and plo the wind

What John intended to write:

> Grandma was in the kitchen when she heard a thump-thump at the back door. And I got up to see who was (there). I seen a skunk, backed up very slowly and jumped out the window.

From: Gillespie, P.H. and Sitko; *A Module for a Decision-Making Model in Teaching the Handicapped;* Indiana University, Bloomington (1976).

1. List the major concerns expressed in the referral and by whom these concerns were expressed.

	MAJOR CONCERNS	BY WHOM
1.		
2.		
3.		

2. List your group's behaviorally specific questions concerning needed information, by whom this information should be collected and the informational tool, e.g. types of formal and informal assessments, that should be used.

	QUESTIONS	BY WHOM	INFORMATIONAL TOOL
1.			

2.

3.

4.

5.

ASSESSMENT SHOULD BE:

. . . BASED ON THE MAJOR CONCERNS BY THOSE AFFECTED (TEACHERS, PARENT, STUDENTS)

. . . BEHAVIORALLY SPECIFIC RATHER THAN BASED ON A TYPICAL ASSESSMENT BATTERY ADMINISTERED TO ALL STUDENTS

. . . UTILIZED FOR THE PURPOSE OF DETERMINING APPROPRIATE PROGRAMS

BIAS IN ASSESSMENT

... OVERUSE OF STANDARDIZED TESTS

... USE OF STANDARDIZED TESTS FOR MINORITY STUDENTS

... MISUSE OF STANDARDIZED TESTING

SOLUTIONS

... COLLECT DATA FROM MULTIPLE SOURCES

- HOME
- SCHOOL
- PEER GROUPS

... USE VARIETY OF ASSESSMENT TOOLS

- CRITERION-REFERENCED TESTS
- RATING SCALE
- FORMAL AND INFORMAL OBSERVATIONS
- CHECKLISTS

... TESTING IN THE STUDENT'S OWN LANGUAGE

... EXAMINE NORMING POPULATION AND ITEM CONTENT OF TEST TO INSURE ADEQUACY FOR MINORITY STUDENTS

... CHECK VALIDITY AND RELIABILITY OF INFORMATION IN TEST MANUALS AND PROFESSIONAL JOURNALS

BIAS IN INFORMATION-GATHERING

CHECK:

... TEST SETTING (TEMPERATURE, NOISE LEVEL, SPACE, LIGHTING, FURNITURE)

... EXPERIENCE OF EXAMINER IN TEST ADMINISTRATION AND INTERPRETATION

... ATTITUDE OF EVALUATOR TOWARD MINORITY STUDENTS

... RAPPORT BETWEEN EXAMINER AND STUDENT

... EVALUATOR'S DEPENDENCE ON STUDENT'S PAST HISTORY

BIAS WILL HAVE A NEGATIVE EFFECT ON THE STUDENT'S PERFORMANCE

FORMAT OF INFORMATION

MOST HELPFUL INFORMATION

. . . ADDRESSES MAJOR AREAS OF CONCERN

. . . IS WRITTEN IN EDUCATIONALLY RELEVANT TERMS

LEAST HELPFUL INFORMATION

. . . DOES NOT ADDRESS THE AREA OF CONCERN

. . . DOES LITTLE TO EXPLAIN THE CURRENT SITUATION

. . . IS NOT WRITTEN IN EDUCATIONALLY RELEVANT TERMS

JUDGING
DIAGNOSTIC STATEMENTS*

INFORMATIONAL STATEMENTS

BASED ON BEHAVIOR THAT HAS BEEN QUANTIFIED, e.g. A FULL SCALE I.Q. OF 105.

INFERENTIAL STATEMENTS

BASED ON THE "UNKNOWN ON THE BASIS OF THE KNOWN." FOR EXAMPLE, SUCH STATEMENTS AS "AUDITORY PROCESSING DEFICITS ARE THE CAUSE OF JOHN'S DIFFICULTY IN READING" ARE BASED ON INFERENCE RATHER THAN KNOWN INFORMATION.

JUDGEMENTAL STATEMENTS

A STATEMENT WHICH IS A "DECISION ABOUT WHAT ACTION SHOULD BE TAKEN". IN DIAGNOSTIC REPORTS, JUDGEMENTAL STATEMENTS ARE OFTEN PRESENTED AS RECOMMENDATIONS.

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*From Mary Ross Moran. "The Teacher's Role in Referral for Testing and Interpretation of Reports". **Focus on Exceptional Children**, November 1976.

4.7

CHECKLIST FOR ASSESSMENT INFORMATION

DOES THE INFORMATION INCLUDE:	YES	NO
• HEALTH STATUS	____	____
• PREVIOUS INTERVENTION RESULTS	____	____
• COGNITIVE STRENGTHS AND WEAKNESSES	____	____
• MOTOR SKILLS PERFORMANCE	____	____
• SOCIAL AND EMOTIONAL STRENGTHS AND WEAKNESSES	____	____
• OBSERVATION OF ENVIRONMENTAL INTERACTIONS	____	____
• STUDENT'S SELF-ASSESSMENT	____	____
DOES THE ASSESSMENT COME FROM:		
• MULTIPLE SOURCES	____	____
IS DIAGNOSTIC INFORMATION:		
• PRESENTED IN BEHAVIORALLY SPECIFIC TERMS	____	____
• EDUCATIONALLY RELEVANT	____	____
• BASED ON MAJOR AREAS OF CONCERN	____	____
• BASED ON FACTUAL INFORMATION	____	____
CAN TEAM MEMBERS DIFFERENTIATE BETWEEN:		
• FACTUAL, INFERENTIAL AND JUDGEMENTAL STATEMENTS	____	____

ACTIVITY TWO: ASSESSMENT

Purpose

The purpose of this activity is to evaluate the relevance and appropriateness of the diagnostic information used in developing an IEP.

Instructions

1. Select a group recorder.
2. Individually read over the diagnostic report on pages 42-44.
3. As a group, answer the questions on the worksheet below. The group recorder should transcribe the group's responses on the newsprint provided by the Team Leader.

WORKSHEET

1. What information do you find helpful to defining John's problems?

a. ______________________________

b. ______________________________

c. ______________________________

d. ______________________________

Least Helpful?

a. ______________________________

b. ______________________________

c. ______________________________

d. ______________________________

2. List the gaps in the assessment information.

a. ______________________________

b. ______________________________

c. ______________________________

d. ______________________________

e. ______________________________

f. ______________________________

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3. List the informational tools you would have used, e.g. formal tests, interviews, etc.

   a. ____________________

   b. ____________________

   c. ____________________

   d. ____________________

4. List the biases you found in the diagnostic report. Read information on pages 45-55.

   a. ____________________

   b. ____________________

   c. ____________________

   d. ____________________

   e. ____________________

5. From the diagnostic reports, identify an example of one statement for each of the following categories.

   a. Informational ____________________

   ____

   ____

   b. Inferential ____________________

   ____

   ____

   c. Judgmental ____________________

   ____

   ____

6. Using the information on bias in assessment found on pages 45-55, list instances of invalid or inappropriate information obtained from the evaluation.

____

____

____

____

____

EVALUATION REPORT

Name: Jose Morales
D.O.B.: 2-15-65
School: Fernwood Junior High
Grade: 7

Jose was referred by his Government teacher because he is failing the class for a second time. Jose is repeating seventh grade this year and is behind in all of his classes. He has a very belligerent attitude at times and seems to be following his older brother's dislike of classes. When he is not in class, Jose is seen as an amiable and well-behaved student who is very friendly with faculty and students. In classes, such as Geography, Jose acts out and causes disruptions. In his second year in this class, Jose spends several days every week out of class, either in the guidance office, or at the in-school detention area.

It is the teacher's hope that through the evaluation process, we can learn about Jose's learning strengths and weaknesses, his present level of academic function and find out the cause for his disruptive classroom behaviors.

Tests Administered

1. Peabody Picture Vocabulary Test
   I.Q. 71
   M.A. 9-6
   C.A. 14-1

2. Detroit Tests of Learning Aptitude
   Visual Attention: 15-7
   Orientation: 15-0
   Social Adjustment: 15-0
   Auditory Attention (Rel.) 14.9
   Auditory Attention (Unrel.) 13.9
   Designs: 10-9
   Motor Speed: 10-0
   Verbal Absurdities: 9.3
   Verbal Opposites: 9-0
   Median M.A. 13-9
   I.Q. 92

3. Beery Test of Visual Motor Integration:

   Age Equivalent: 8-6
   C.A. 14-1

4. Wechsler Intelligence Scale

   Vocabulary Sub-test
   Scale Score: 12

5. Illinois Test of Psycholinguistic Abilities

   Visual Association sub-test:
   Age score = 10-5
   Visual Memory sub-test:
   Age score = 10-9+
   Verbal Association sub-test:
   Age score = 9-7

6. Peabody Individual Achievement Test

   Mathematics: 8.7
   Reading Recognition: 7.5
   Reading Comprehension: 5.3
   Spelling: 4.1
   General Information: 6.9
   Total Test: 6.5

Interpretation and Recommendations

From these tests it is obvious that Jose is working in regular classes under a real disadvantage. Because his two I.Q. scores are so disparate, getting an average of the two gives a better idea of his ability level. With an I.Q. of 81, Jose has definite limited abilities in academic areas. His scores on the P.I.A.T show that despite some skills in math areas, his basic reading and spelling skills are at a level commensurate with his I.Q. Despite five years in the United States, Jose still reverts back to Spanish when he is confronted with difficult tasks. During the WISC-R vocabulary test, he repeated every stimulus word in Spanish and, though he did well on this list, it took a great deal of time for him to complete it. Another significant set of scores are the ones involving motor skills on the Beery and the Detroit. These low scores are typical of a developmentally "slow" child or a "slow learner." Because Jose has repeated two grades - 4th and 7th, it is obvious that he needs more help than he is presently getting. Jose needs substantially separate program where the academic demands can be geared to his ability. He is unable to function presently in almost all of his classes. Whenever any written demands are made of him, he becomes a behavior problem. Jose needs a consistent, structured classroom to help him learn in school, rather than ending up as his brother did last year. The separate classes may be good for him in another way, in that it will separate he and his brother and give Jose a better chance in school. If Jose is mainstreamed, eventually back into some classes, his teachers should be aware of his needs so that his grades can improve. Some of his teachers have tried to discuss some of points earlier in the year with Jose's parents. Although his mother has always come eagerly to any conference requested, her lack of English usually makes open discussion difficult. She relies on Jose's nine year old sister for translation of anything she doesn't understand. When the Team meets, it is important Mrs. Morales have a translator available.

GUIDELINES ON NON-BIASED ASSESSMENT

Several court cases, particularly in California, have drawn national attention to the issue of using the norms of the majority to make educational and other decisions about individuals of minority backgrounds. Federal legislation has addressed itself to this problem. Public Law 94-142, The Education of All Handicapped Children Act of 1975 requires:

> . . . procedures to assure the testing and evaluation materials and procedures utilized for the purpose of classification and placement of handicapped children will be selected and administered so as not to be racially or culturally discriminatory (Section 612,5C).

The National Association of School Psychologists recently developed and adopted resolutions with regard to standards for assessment techniques. These include:

- Assessment procedures and program recommendation are to be chosen to maximize the student's opportunities to be successful in the general culture;
- All student information is to be interpreted in the context of the student's cultural background; and,
- Training of psychologists needs to include an understanding of diverse cultures and an implementation of unbiased assessment practices (NASP, 1976).

The guidelines in this paper pose a series of questions that Evaluation Team Leaders must continually ask themselves and others throughout the Evaluation Team process.

Referral

1. How are the parents/guardian/student made aware that a referral has been made?
2. Who is the usual person to make referrals?
3. What efforts are taken to insure that the student's presenting problem is clearly stated on the referral?

   What steps are taken to insure that the referral includes descriptive samples of behavior rather than opinions of the referring agent?

   What kinds of supportive documentation accompany the referral?

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4. How is it determined that the referral is legitimate?

   What steps are taken to insure that a referring agent does not have a history of over-referral of students from certain cultural groups?

   What steps are taken to assure that a student is not referred because of irrelevant personal characteristics (e.g., sex or attractiveness)?

   What measures are used to assure that a referral is not made because of a misinterpretation of a student's actions or expressions due to a lack of understanding of the cultural differences between the referring agent and the child?

5. What kinds of interim recommendations does the assessment Team provide to try to eliminate the needs for a comprehensive evaluation?

   What approach is taken to insure that the curriculum being used assumes the student has developed readiness skills at home that s/he has not had the opportunity to develop? Who assists the teacher in planning a program to give the student the opportunity to develop those readiness skills which may not have developed at home?

   How does the Team provide information on the student's cultural background for the referring agent so there are fewer misunderstandings between the referring agent and a student?

6. How are the parents/guardian/student informed of the referral in their primary language?

   How are the reasons for referral explained?

   What information is given to them regarding activities following the referral (e.g., professional evaluations, use of collected data, design of an Individualized Educational Plan, if necessary)?

   What information is given regarding due process (e.g., appeal, independent evaluations, confidentiality)?

   How is permission for evaluations documented?

   What measures are taken to assure active participation in all phases of the assessment, planning and implementation phases of the process?

   How are they informed of their right to examine all relevant records in regard to the identification, evaluation and IEP? What is the mechanism for such examination?

Meeting with the Student

1. What are the special conditions about the student which are considered?

   How is the student's primary home language determined?

   How is information gained about the student's home environmental factors (e.g., familial relationships, placement, social and cultural customs)?

   Who on the Team understands the student's culture and language so that an accurate level of performance is evoked which indicates the student's underlying competencies?

   What measures are taken to assure that the student is not impeded by a handicap other than the referral problem?

2. How are special conditions about the assessor accounted for such as:

   Strongly positive or negative feelings;

   Differing values;

   The effect of feelings and differing values on the performance of the student;

   The effect of feelings and differing values in administering and interpreting assessment;

   What provisions are made if an assessor discovers such special conditions about him/herself?

3. What care is taken in the examination of all available information and seeking out additional information concerning the student?

   How is it determined if the student's academic performance has or has not been consistent from year to year?

   How is it determined if the student's performance was negatively or positively affected by past or present classroom placement or teacher?

   How are comparisons made between past test scores and past class performance?

   How is it assured that the assessor is familiar with past test instruments and the degree of reliability of past scores?

   How are arrangements made to assure that the assessor can observe the student in as many environments as possible (e.g., individual, large group, small group, play, home)?

What measures are taken to help ensure that illegitimate assumptions are not made about a student (e.g., assume s/he speaks and reads Spanish because s/he is Puerto Rican)?

How is additional information on non-school related variables which may affect the student's school performance gained (e.g., health factors, family difficulties, peer group pressures)?

4. How is the student made aware of why s/he is in the assessment situation?

   What provisions are made to explain the reason for the referral at his/her level of understanding?

   What procedures are used to help the student to freely express his/her perceptions of the "problem"?

   How is the student informed of what the "next steps" will be?

Selection of Approach for Assessment

1. What considerations are taken into account to ensure the best assessment approach for the student?

   Upon what bases are behavioral observations, interviews, informal techniques, or standardized techniques selected for individual students?

   How are relative weights arrived at for assessing adaptive behavior and academic school behavior?

   What measures are taken to assure that the approaches selected are consistent with the student's receptive and expressive abilities?

   What techniques are used to assure that there is no overdependence on one technique and overlooking others which may be more appropriate? How is the balance between formal and informal techniques achieved?

2. What considerations are made in relation to the use of standardized instruments?

   What measures are taken to ensure that the student is not tested simply because of tradition?

   How is it ensured that a test is not given just because it is part of the "Battery"?

   What procedures are used to ensure that a test instrument's standardization included a sample from the student's cultural group?

   What checks are in place to ensure that certain tests are administered only because the assessor was directed to do so because of policy?

What safeguards are in place to ensure that the subgroup scores contained in the manual of a test given to a student reflect the subgroup to which the student belongs?

How is it determined if there were large enough numbers of the student's cultural group in the test sample to have any reliance on the norms?

How is the test given reviewed to ensure it does not contain illustrations that are misleading and/or outdated?

How is the test given reviewed to ensure it does not use vocabulary which is colloquial, regional, and/or archaic for the student being tested?

What measures are taken to ensure the assessor understands the theoretical basis of the instrument?

What are the assurances that the use of any particular instrument easily assists in delineating a recommended course of action to benefit the student?

How are the assessors kept abreast of the current literature regarding test instruments?

How are assessors kept abreast of current research related to potential cultural influences on test results?

Test Administration

1. What factors (attitude, physical conditions, etc.) are used to support the need (or lack of need) to reschedule the student for evaluation at another time?
2. How is the physical environment of the test setting controlled to avoid adverse effects upon student performance (room temperature, noise, inadequate space, poor lighting, furnishings inappropriate for the student's size and/or handicap)?
3. How is it assured that the assessor is familiar with the text manual directions and actually follows them?
4. What assurances are there that directions given to the student are clearly understood?

    Was the student given directions in his primary language?

    What procedures were used to assure the student understands directions given?

5. What provisions are made to accurately record entire responses to test items (even though incorrect) so proper consideration is made when interpreting test scores?

6. How is rapport established and maintained with the student during the evaluation setting?

Scoring and Interpreting

1. How is item analysis of the test achieved?

    What procedure is used to determine if there is a pattern to missed and/or passed items?

    How are items which may contain cultural bias for the individual student assessed identified?

    What procedures are used to interpret the test results when items missed because of cultural bias are considered?

2. What are the other factors taken into account in interpreting a student's test scores?

    How is the student's attitude and/or physical condition related to test performance?

    How is the degree of rapport between test administrator and student accounted for in interpreting test results?

    How are other measures of behavior taken used in the interpretation of test results?

    How is the "standard error of measurement" accounted for in the interpretation of a test score?

3. How is the degree of confidence in any measurement and/or interpretation expressed?

    What measures are taken to assure no one instrument or procedure has an undue influence in decision-making regarding the student?

    How does "professional judgment" relate to the use and/or interpretation of any assessment instrument or procedure?

Consultation with Team Members and Others

1. What measures are taken to assure that an assessor works as an integral member of a multi-disciplinary Team on behalf of a student?

    What provisions are made so that the assessor actually meets with the Team to share findings regarding the student?

    What mechanisms are used to insure that disparate findings among Team Members are resolved?

    Are the limitations of a discipline clearly understood by all Team Members?

    What mechanism is used to allow Team Members to request assistance from other Team Members?

    What provisions are made that any conclusions arrived at concerning the child are actually the result of Team consensus and not the result of the personality and/or power of an individual Team Member?

2. How are the limitations of the Team expressed and accounted for?

    What provisions are made to use community resource personnel and agencies who may be of assistance in the development of an IEP for a student?

    What provisions are made to use community resource personnel before, during, and after the evaluation?

    How are provisions made to include the student and/or parent in Team discussions?

Assessment Report

1. What criteria is used to assure reports are clearly written and free of jargon so they can be easily understood by the particular student, his/her parents, and teachers?
2. What mechanism is in place to assure the report answers questions raised by the referral or provides reasons why they were not answered?
3. What criteria is used to assure recommendations contained in the report are realistic and practical for the student, school, teacher, and parents?
4. How are assessors made aware that alternative recommendations are needed?
5. How is the Team made aware of any problems an assessor encountered during the assessment of the student and the effects upon the report?

In addition to these guidelines, the authors of this module cite additional errors in testing:

1. Giving the wrong test for the wrong reason. For example, the Slingerland Screening Test is an excellent group test for identifying students in classes who may have a processing or language deficit. Screening tests are not designed to be used as an individual diagnostic procedure.

2. Administering a test which gives an I.Q. among other scores such as the PPVT or DTLA and then using that I.Q. as a global indicator of general intellectual functioning. The Peabody is a test of receptive vocabulary and though vocabulary is one of the indicators of intelligence, it is not the only indicator of intelligence. The Detroit, while identifying discreet areas of strength and weakness gives an I.Q. based on a median mental age - a median derived by listing subtests from highest to lowest scores. Since the I.Q. is based on scores from only the nine Detroit subtests, other areas of strength or weakness may be over or underemphasized. Also, the I.Q. score only gives a general indication of ability at the time of testing and on that particular test. An 89 I.Q. one week could be a 102 I.Q. two weeks later.

3. Testing is the correlation of seemingly related sections from a number of tests as proof that a certain problem exists. An example would be comparing sub-tests of the Illinois Tests of Psycholinguistic Abilities (ITPA) to certain WISC-R sub-tests. The ITPA appears to be a test much abused in this manner perhaps because it reputedly samples behavior in readily defined areas such as visual memory, auditory association, converts from scaled score to Mental Age, etc. This is not a valid use of a test and the results are certainly suspect.

4. Giving the right type of test for the right type of reasons to the wrong type of student. Giving a verbal test to a deaf child, a test validated and standardized on a middle class, white population to a minority student, a test designed for ages four through ten to a student who is fourteen or giving six tests in five consecutive hours to the same student, are all examples of this type or error.

The following are a list of commonly used tests:

1. Beery-Buktenica Test of Visual-Motor Integration - Appropriate ages: 2 to 15. Test assesses integration of visual and motor skills. Score is given in age equivalent. Group or individually administered. High reliability in comparison to other measures of perceptual-motor skills.

2. Bender Visual-Motor Gestalt Test: Koppitz scoring for ages 5 - 11. Clinical scoring for ages beyond. Test assesses visual-motor skill development integrated with visual-motor perception. Though scoring is possible in both cases to indicate possible brain damage or emotional problems, instruction states it should never be used in isolation, or as a diagnostic instrument. Score is given in age equivalent. Individually

administered. Low reliability. Koppitz states: "The fact that the Bender is so easy to administer presents a certain danger. It is probably one of the most overrated and misunderstood tests currently in use." (1975, p.2) It should not be used as a test of intelligence.

3. Benton Visual Retention Test - Appropriate age: 8 years to adult. This test involves drawing designs both from a model and from memory and is often used clinically to define neurological problems. Errors of rotation or distortion are interpreted as possible signs of brain dysfunction. Scores are given in age levels. Should not be used in isolation as indicator of problems.

4. Boston Naming Test - Appropriate age: 6 years to adult. This test taps retrieval of information based on a task involving identifying eighty-five pictures. Low score indicates person at risk for reading problems.

5. Detroit Tests of Learning Aptitude - Appropriate age: 3 years to adult. This test is composed of nineteen sub-tests which tap a variety of behaviors ranging from verbal skills to social adjustment. A minimum of nine sub-tests and a maximum of thirteen are given to a student depending upon his age. Scores are reported in converted mental ages. A graph is drawn showing strengths and weaknesses. An I.Q. can be obtained but since it is based on a median mental age, it should not be taken as a valid global indicator of ability.

6. Goldman-Fristoe-Woodcock Test of Auditory Discrimination - Appropriate age: four years to adult. This test provides a measure of auditory discrimination under ideal listening conditions and a comparative measure of auditory discrimination in the presence of controlled background containing noise. Composed of three parts, the test involves a training procedure, a quiet sub-test and noise sub-test. Separate norms are provided from ages 3 years 8 months to 70 years and over.

7. Illinois Tests of Psycholinguistic Abilities - Appropriate age: two years ten months to ten years, three months. Individually administered. The ITPA contains ten regular and two supplementary sub-tests and is designed to evaluate understanding, processing and production of verbal and non-verbal communication. Raw scores are converted to scaled scores with a mean score and standard deviation. Psycholinguistic ages are given for each sub-test. Sub-test scores or PLAs are invalid individually unless taken in context of the test. Although designed as a diagnostic instrument, only "average" students were involved in the standardization. Research in norms and validity is very poor.

8. Peabody Individual Achievement Test - Appropriate age/grade level: Kindergarten through grade 12. The five sub-tests (math, reading, recognition, reading comprehension, spelling and general information) are presented in easel form. Examiner reads questions and student selects answer from plate with four choices. No writing is involved. Scores are given in age equivalents, grade equivalents, percentile ranks, and standard scores. Grade scores tend to be higher than actual classroom functioning

since no motor skills are involved, but good standardization makes it a good indicator of general content skills.

9. Peabody Picture Vocabulary Test - Appropriate age: 2-18. Individually administered. Test consists of a series of pages with four pictures on each page. The examiner reads a word and the student points to the picture that best represents it. Test is scored in mental age, percentile and I.Q. Was designed to provide estimate of student's verbal intelligence. It measures receptive language, only one aspect of intelligence. Standardized on 4,012 Caucasians from Nashville, Tennessee. It is one of the more valid picture vocabulary tests.

10. Rapid Automatized Naming Test - Appropriate age: 6 years to adult. This test is used in a clinical setting to evaluate left hemisphere mechanisms. Given the task of rapidly evaluating, retrieving, and labeling stimuli, the person with damage in the left hemisphere will present a certain pattern of errors. This pattern when viewed with other test results will give the diagnostician information on the strengths and weaknesses of the person tested. Analogies can be established between areas of weakness and academic needs and between strengths and successful instructional techniques in classes.

11. Rey-Osterrieth Complex Figure - Appropriate age: 6 years and older. This test involves copying and recalling with a time log. The focus of this test is not to generate a score but to evaluate quality of performance of brain systems involved. Quality of performance is used to characterize cognitive strengths and weaknesses.

12. Token Test - Appropriate age: 6 years and above. This test measures the individual's ability to process verbal directions on increasing lengths and complexity. This test has five parts. The items in the first four parts contain commands of a verb-subject format. The lengths increase from four to ten words. Conjunctions are contained in part two, three and four. Part five of the test introduces complex syntax structure and compound oral commands. Processing of linguistic operations is tapped for such concepts as if, then, are, and except. Usually used in clinical speech and language evaluation. Score is given in age expectations.

13. Trail Making Test - Appropriate age: 6 years and older. This test involves connecting dots forming designs. It has an A and B form, is used in making clinical judgments based on the types of errors made. Shifts of direction and ability to recall and focus are involved in the visual motor task.

14. Wechsler Intelligence Scales for Children - Revised (WISC-R) - Appropriate age: 6 - 16. Individually administered. Test consists of twelve sub-tests (ten plus two optional) divided into verbal and performance areas. Scores are combined to give an individual I.Q. score. Reliability and validity good. Reliability based on global task performance. Sub-test used in isolation not reliable. Mental age interpolation available but not designed for broad interpretive use.

15. Wepman Auditory Discrimination Test - Appropriate age: 5 to 8. Individually administered. The ADT consists of four pairs of words, ten identical words and thirty differing. Is designed to assess auditory discrimination skills. Scores are drawn from the performance on the different word pairs and can be converted to a five point rating scale. The reliability of the ADT is questionable. Norms are not available.

16. Wide Range Achievement Test - Appropriate age: two levels of the test. Level I for students 12 and under; Level II for students over 12. Individually administered. The WRAT consists of three sub-tests (reading, spelling and arithmetic), but offers only very limited tasks involving reading, spelling and math. For instance, the reading sub-test asks the student to decode single words but does not require comprehension or skills. Arithmetic only tests computational skills in limited areas. Due to narrow, standardization and limited behaviors involved, the WRAT should not be used alone to base decisions for curriculum, adjustment or placement.

17. Woodcock Reading Mastery Tests - Appropriate age/grade: kindergarten to grade 12. There are two forms and the test is individually administered. The Woodcock consists of five sub-tests (Letter Identification, Word Identification, Word Attack, Word Comprehension, and Passage Comprehension). The test gives scores converted to grade scores, age scores, percentile ranks, and standard scores. The tests can be used either in a norm-referenced or criterion-referenced manner. The Woodcock can provide data on individual strengths and weaknesses. Validity of test is well established.

GLOSSARY

1. Abstract ideas - refers to manipulation of concepts represented by our language, e.g., likenesses and differences between two terms.
2. Apraxia - ability to initiate motor output or purposeful motor activities; considered to be related to central nervous system.
3. Attention span - length of time an individual can concentrate upon a task.
4. Auditory discrimination - ability to recognize a difference between phoneme sounds and to identify words that are the same and words that are different.
5. Auditory processing deficits - inability to receive, store, and/or reproduce sensory information presented to the ear.
6. Block design - a sub-test of the WISC-R in which the student is to match designs (to a visual model) by manipulating varied colored blocks. (Subject must use colored blocks to copy a geometric design).
7. Chunking - clustering information according to common feature, e.g., remembering all nouns.
8. Consonant sounds - letters pronounced so that each keeps its identity, e.g., street.
9. Digit span - a sub-test of the WISC-R measuring the child's ability to remember and repeat a series of digits after the examiner says them, e.g., 3,4,1,5.
10. Distractibility - the inability to attend to one task without being "distracted" or "engaged" by other stimuli; for example, the ringing of telephones or people walking down the hall may capture an inordinate amount of the child's attention.
11. Expressive vocabulary - vocabulary student is able to produce in words, phrases, and sentences.
12. Fine motor control - control of small muscles, e.g., those muscles in the hand.
13. Gross motor ability - large muscle coordination.
14. Hyperactivity - continued or excessive movement and motor activity.
15. Hyperkinetic syndrome - characterized by extreme motor activity, usually associated with brain injury.
16. Linguistic patterning - formation of word families, e.g., mat, cat, rat, sat, etc.
17. Manipulative materials - concrete materials that a student can touch, maneuver.

18. Mixed-handedness - shifting from right to left hands for certain tasks.

19. Morphological - applies to the rules of the formulation of words, e.g., prefixes, suffixes, plurals.

20. Multi-sensory approach - using more than one sense in instruction, e.g., motor (tracing, touching), sight, sound.

21. Pure tone hearing - a sound of single frequency (a pure sound wave without overtones).

22. Petit mal seizures - seizures that typically are characterized by momentary blackouts as opposed to gross muscular activity (grand mal seizures).

23. Perseveration - the tendency to continue an activity once it has been started and unable to modify or stop the activity even though it is acknowledged to have been inappropriate.

24. Phonetic cues - cues that are related to sound and speech production characteristic of letters.

25. Phonics - the establishment of a sound (phoneme) of the language with the equivalent written symbol (grapheme).

26. Receptive vocabulary - vocabulary (words, phrases, and sentences) within the student's listening vocabulary.

27. Reauditorization - internal auditory rehearsal of digits, words, or sentences.

28. Sight words - those words that a student can pronounce automatically (within one to three seconds).

29. Syntax - the grammar system of a language. The linguistic rules of word order and function of words in a sentence.

30. Visual motor deficits - difficulties in coordinating vision with the movements of the body or parts of the body.

31. Visual perception - identification, organization, and interpretation of sensory data received by the individual through the eye.

32. Word retrieval - ability to find and express words.

GROUP PROCESS SKILLS

LISTEN ACTIVELY
- Establish eye contact
- Use non-verbal and verbal gestures to confirm that you are listening
- Be attentive at all times

ESTABLISH A FLOW OF CONVERSATION
- Establish time limits for discussion on each point
- Tie similar points to each other

CLARIFY GOALS
- Establish an agenda
- Work together to come to agreed upon tasks

PROBE
- Do not ask all yes-no questions
- Obtain all necessary information

DO NOT USE TECHNICAL JARGON
- Use simple, clear language
- Define your terms

RESOLVE CONFLICTS
- Strive for workable compromises
- Strive for active participation
- Listen to all sides

CLARIFY STATEMENTS
- Restate comments in your own words
- Ask participants if your understanding of their comments is correct

SUMMARIZE MAJOR POINTS
- After each point, summarize salient points of discussion
- Display these for all participants to see

4.9

PASSIVE PERSON	AGGRESSIVE PERSON	ASSERTIVE PERSON
DOES NOT EXPRESS: • Needs • Feelings • Ideas } Allows People To Infringe On Rights	EXPRESSES: • Feelings • Needs • Ideas } At The Expense Of Others	EXPRESSES: • Feelings • Needs • Ideas } Without Violating Rights Of Others
BEHAVIOR IS: • Inhibited • Indirect • Self-Denying • Emotionally Dishonest	BEHAVIOR IS: • Defensive • Hostile • Overpowering • Manipulative	BEHAVIOR IS: • Emotionally Honest • Direct • Expressive • Self-Enhancing
DOES NOT ACHIEVE GOALS AND FEELS: • Anxious • Disappointed • Angry • Resentful	MAY ACHIEVE GOALS BUT FEELS: • Self-Righteous • Guilty • Frustrated • Alone	MAY ACHIEVE GOALS AND FEELS: • Confident • Good
AVOIDS CONFLICT	NOT WILLING TO: • Compromise • Negotiate	WILLING TO: • Compromise • Negotiate

STYLES OF COMMUNICATION

YOU ARE AT A TEAM EVALUATION MEETING. A PSYCHOLOGIST SPEAKS UP AND URGES THE GROUP TO SEEK PRIVATE PLACEMENT FOR YOUR STUDENT. YOU DISAGREE WITH THE IDEA AND THE DATA HE HAS COLLECTED. YOU . . .

1. SAY, "YOU'RE RIDICULOUS. YOU DON'T EVEN KNOW WHAT YOU ARE TALKING ABOUT."

2. SAY NOTHING, EVEN THOUGH YOU DON'T AGREE.

3. REPLY, "I HEARD YOUR RECOMMENDATIONS, BUT I DISAGREE WITH YOU. I SEE A DIFFERENT TYPE OF BEHAVIOR IN MY CLASSROOM AND WOULD LIKE YOU TO LISTEN TO MY POINT OF VIEW."

4. WHISPER TO THE PERSON SITTING NEXT TO YOU THAT YOU DISAGREE WITH THE REPORT.

5. SAY, "I DO NOT KNOW MUCH ABOUT THIS. I'M ONLY THE CLASSROOM TEACHER."

WAYS TO BE ASSERTIVE

... BE PERSISTENT ABOUT LETTING OTHERS KNOW WHAT YOU WANT AND HOW YOU FEEL WITHOUT GETTING ANGRY, IRRITATED, OR LOUD

... BE READY TO COMPROMISE AND NEGOTIATE

... COMPROMISE

... ADMIT YOUR MISTAKES

... LET OTHERS KNOW YOU HEAR THEM AND UNDERSTAND

YOU HAVE THE RIGHT TO:

... DISLIKE OTHERS
... CHANGE YOUR MIND
... DISAGREE
... MAKE REQUESTS
... STATE YOUR FEELINGS
... MAKE REFUSALS
... MAKE MISTAKES
... SAY "NO"

... ASK FOR MORE INFORMATION AND/OR VERIFICATION FROM OTHER PROFESSIONALS

... SAY "I DON'T KNOW" OR "I DON'T UNDERSTAND"

CRITERIA FOR STUDENT'S PARTICIPATION IN TEAM MEETINGS

STUDENTS SHOULD PARTICIPATE IN THE TEAM MEETING IF S/HE:

... CAN EXPRESS LIKES AND DISLIKES TO THE GROUP OR CAN BE UNDERSTOOD BY ONE PARTICIPANT WHO CAN INTERPRET THESE LIKES AND DISLIKES TO THE GROUP

... CAN ENGAGE IN LOGICAL THINKING

... IS TO PLAY A MAJOR ROLE IN THE IMPLEMENTATION OF THE PROGRAM (E.G. WORK STUDY PROGRAM)

... GOALS ARE TO BE AFFECTED BY THE DECISIONS AT THE MEETING, FOR EXAMPLE, A REMEDIAL READING COURSE MAY CLOSE OUT THE STUDENT'S OPTIONS TO TAKE PRE-VOCATIONAL COURSES

... IS OVER EIGHTEEN

LEGALLY, THIS DECISION IS THE RESPONSIBILITY OF THE PARENTS UNTIL THE STUDENT IS OF MAJORITY AGE

ACTIVITY THREE: SHARING INFORMATION

Purpose

The purpose of this activity is twofold: (1) to involve you in the decision-making process by:

a. determining John's present levels of performance;

b. establishing student centered goals for John;

c. specifying a service delivery plan for John.

2) to introduce you to some aspects of group dynamics related to Team Evaluation meetings.

Description of the Activity

In this activity, participants will play rols of possible members of the Team e.g.(a) the parents; (b) the school psychologist; (c) the generic specialist; (d) an observer; (e) the speech and hearing specialist; (f) the English teacher; (g) the special education coordinator; and (h) John (optional). Each participant will be assigned a role to play. Role cards will dictate your behaviors in the group. Participants must not show their role cards to each other. The participants simulating the roles of various professionals will perform the decision-making tasks above.

Instructions

1. Take approximately fifteen minutes to study and prepare your role. (Use case study information on pages 64-77). Do not show your card to the other participants.

2. Before you begin the role play, decide whether or not you wish John to participate in the Team Meeting. Prepare a group statement for John's inclusion or exclusion. This statement will be shared with other groups at the completion of the role play.

3. You are required to complete the following tasks:

   a. Agree upon the educational levels of performance based on the areas of major concern expressed in the referral and the evaluation data collected during the referral process.

   b. Establish general student centered goals.

   c. Develop a service delivery plan for John.

Note that this is not the usual procedure for developing an IEP. The tasks outlined are presented for the purpose of the role play. (See Module Three for instructions on developing an IEP).

Department of Pupil Personnel Services
Generic Specialist Report
Date of Evaluation: October 24, 1978
Name: John Smith D.O.B. 5/25/64
School: Ferndale Specialist: M. Gray

Referral:

John was referred for evaluation by his English teacher. He has a history of learning problems compounded by seizure disorders. He has repeated once in addition to transitional first grade placement.

Behavior During Evaluation:

I saw John twice in the Resource Center for evaluation plus several classroom observations. In the Center we were free from any distracting activities or sounds. Even so, John was very easily distracted from any task.

Tests Administered:

1. Wide Range Achievement Test:

Reading: 4.1
Spelling: 3.7
Arithmetic: 4.5

2. Beery Test of Visual-Motor Integration

Chronological Age: 14-5
Age Equivalent: 10-3

3. Detroit Test of Learning Aptitude:

C.A. 14-5
M.A. score:

Visual Attn:	15-7
Orientation	14-9
Aud. Attn (Rel.)	14-5
Social Adjustment (B)	13-9
Designs	11-3
Verbal Opposites	9-7
Motor Speed	9-0
Verbal Absurdities	8-5
Aud. Attn. (Unrel.)	8-3

Median MA 11-3 I.Q. 72

4. Woodcock Reading Mastery Tests

	Grade score:
Letter Identification:	5.2
Word Identification	4.3
Word Attack	3.7
Word Comprehension	4.1
Passage Comprehension:	3.9
Total Reading:	4.2

Mastery Score: Grade 5 = 65% accuracy
Grade 4 = 96% accuracy

Informal Assessments/Observations/Interpretation

In classroom situations, it is obvious he has trouble sitting still through forty-five minute periods. In both classes I observed, he got in trouble for fiddling with his papers and talking out in class. In one independent study session on September 29th, I noted that John interrupted his work eighteen times. These interruptions included looking up at other students, moving about the room, watching the teacher's interactions with various students, looking out the window at various noise-producing vehicles, sharpening his pencil (three times) and talking to other students. Each time the teacher would remind him to get back to work, and he would return to his seat, only to be out again.

During a one-to-one session with his Geography teacher on Oct. 3, the teacher was going over the names of the continents with John. John said, "Listen - hear that plane? Where is it?" The engine noise was barely audible but John raced to the window and finally located the plane. No amount of urging could get John back on the task until the plane was out of visual range. Turning to the desk, he could no longer recall what he and the teacher had been working on.

Rapport was established between John and myself, so I feel that his performance on the tests accurately indicates his strengths and weaknesses at this time. Many of the areas tapped in the tests seemed stressful to him.

John has language problems, both expressive and receptive. He had some problems following oral directions but none when following a demonstration. He learns best through the visual channel. John has a problem translating thought into writing or copying, but he can do it if the required response is realistic. On the WRAT, his handwriting on one syllable c-v-c words: words with digraphs such as ee or ea, or words with consonant blends was legible and well formed. As he was given words above a fourth grade level, his writing became more illegible and haphazard, with letters placed in any order just to look like a word. John tries to spell phonetically, i.e. science is spelled siens. He also tends to add "e" randomly to the end of unknown words.

John's scores on the Detroit offer further indication of his strengths and weaknesses. His responses do not indicate the great social immaturity his parents have been told about. His visual attention was strong, as he has shown in other sub-tests and in classes as his behavior when observed. He does not have problems with spatial organization, time or direction. He is able to repeat dictated sentences very well- but this did not tap understanding. His weaknesses include understanding of verbal usage, auditory association of ideas and memory for auditory in-put that is unfamiliar. In other words, he could recall sentences but he could not recall lists. On the lists he tended to perseverate and repeat prior words. It is important that the I.Q. score gained from the Detroit NOT be viewed as representative of his intellectual ability, but rather indicative of the problems which have continued to make learning very difficult for him.

John does not know all the sounds of the alphabet. He confused d,p, t,v, and b in words. When he reads a word, he does not make this confusion, but if the word is more than one syllable, he forgets what the prior sounds were and upon completion, guesses at a word with the same beginning consonant. His overall mastery level of grade 4 with 96% accuracy was repeated in his English class where he is able to work on the green level SRA word building kit in English which is an early fourth grade kit. John needs to "relearn" reading skills from the basic sound/symbol association on through spelling rules.

In math, the samples of his word from his teacher shows he has a firm grasp of addition, borrowing in the one's place, multiplying up to the 4 times table and working with simple fractions. He has unique responses to problems he cannot easily solve such as cross addition or subtraction or more complex multiplication processes.

No matter the setting, John showed little faith in his ability to do work required of him. It is important that John be given opportunities to succeed and the best way is to give him academic work that is realistic for him.

Recommendations:

1. Use manipulative materials for teaching. He can learn by sight backed up by phonics and patterning. Trade books for materials such as Scholastic's Driving and Life Skills math.

2. For content area instruction, supplement regular instruction with materials such as the GO - Reading in the Content Areas program. Tests should be adapted to his ability to produce.

3. Any materials given John in regular classes should be available to other students. He should not be set apart as unable to learn as others do. Others in his classes could probably benefit from mixed modality instruction.

4. John should be involved in the evaluation process as much as possible. He verbalized his fear that being tested meant being sent back to the Meadowbrook School. His twin brother told him this.

Department of Pupil Personnel Services
Outside Evaluation Request
Area: Neurology Date of Report: 10/28/78
Student Name: John Smith D.O.B: 5/25/64
School: Ferndale Specialist: Dr. M. Winter
Medical Center
Neurology Clinic

History

John was born one month prematurely after normal pregnancy. Birth weight was 5 lbs. 4 oz. John and twin (5 lb. 8 oz.) were Mrs. Smith's seventh pregnancy.

John is reported to have had respiratory difficulties at birth and had been incubated for six days. He was again in intensive care unit at age 9 days, when he developed staph infection. He was hospitalized for 6 weeks.

Motor development was in normal limits. Speech and language development was slow; words around 2 years, phrases 2 1/2 - 3 years. Medical history is complicated by seizures since age of 2 years. John presently takes 150 mg. Dilantin daily. The medical records document seizure foci variously in occipital, posterior frontal and temporal lobe sites in the left hemisphere.

There is a positive family history for learning problems including left or mixed handedness, delayed speech/language, reading, arithmetic, and spelling difficulties and poor handwriting. John's 9 year old brother had a lot of problems with "reversals" but has managed to stay with his grade throughout school. A 13 year old sister is reported to have had reading problems which have improved.

Tests Administered

Trail Making B - incomplete would not perform

Boston Naming Test - scored 2 standard deviations below the norm.

Rey-Osterrieth Complex Figure - see interpretation.

Similarities (Calif. Test Mental Mat.) Mental Age 14.2

Rapid Automatized Naming - depressed pattern - see interpretation

Behavior During Testing

John was evaluated at the Medical Center Neurological Clinic. Setting was appropriate and without distraction.

It became apparent, as the neuropsychological evaluation proceeded, that I was asking John to do things that were hard for him. His manner was not particularly friendly and at times he was quite sullen. He was very distractible and has clearly learned strategies for getting rid of some of his abundant energy; he asked to wash his hands, go to the men's room, get a drink, etc.

John finds it difficult to persevere with any one task. Optimal performance requires tasks be changed frequently and that a fairly fast pace of work be maintained.

He was more interested in tasks such as drawing (does not tap verbal skills) than he was in other abstract tasks. There was a great deal of "I can't ..." "I don't like..." etc. as he proceeded. This should be discouraged since, although he does have difficulty with various tasks, he can do more than he thinks or says he can.

Interpretation

Left-sided brain systems are the primary mediators of language, and posterior systems are associated with language comprehension skills. John's low scores on verbally-based tasks is thus consistent with the history. The neuropsychological tests further support the primary findings of relative impairment of left hemisphere brain systems.

The difference between recognition of verbal labels and the ability to generate them can clearly be seen in comparing the PPVT and the Boston Naming Test. Here, where he had to find the name of a pictured object, John's performance was markedly depressed, being more than 2 standard deviations below the mean for his age.

On Rapid Automatized Naming which has been shown to be depressed in dyslexic groups with identifiable language impairment, John showed the typical depressed pattern, taking more than twice as long as the mean for his age to complete the task.

On Similarities (CTMM), John scored at the 14 year level again. This task is a measure of analogous reasoning with visual presentation. John's performance again attests to his very adequate abilities in specific areas.

The Ray-Osterreith Complex Figure was completed in notable configurational fashion showing the need for 'anchors' to keep control of the finished product.

Trail Making A was age-appropriate, but the B condition was clearly very stressful for John. He lost interest, became very distractible, played around with only one of the two series, and then failed to finish. This task provided a clear example of the necessity for keeping tasks within John's capacity until he has mastered each new part. Any overload is simply too stressful for him to cope with and results in self-defeating frustration.

Perseveration was extremely marked on Repeated Patterns. John again found the task difficult and became completely disorganized with patterns 'wandering' all over the place.

Summary and Recommendations

In summary, John is a 14 year old boy who presents with a cluster of systems, any one of which gives him a 'right' to an educational disability. He has positive family history of learning problems; he has documented seizure disorder; he was the product of an 'at-risk' delivery; he has left hemisphere (and thus language) compromise; and he does present some of the hyperactive behavior and difficulty in cognitive 'control' that constitutes the so-called "hyperkinetic syndrome".

In light of the above, John is likely to need special educational help. In view of the language impairment, reading, which is, of course, heavily language based, is clearly at risk. The teaching of reading and specific language remediation should be undertaken hand-in-hand. As much accompanying visual and tactile input as possible should be incorporated into all teaching materials in order to keep John interested.

Specific help in breaking down problems into parts should always be considered. Instructions should be given one at a time; John is not a youngster who can be expected to retain and process long strings of verbal instructions, if they are unaccompanied by contextual materials.

Mathematic skills are as yet little understood by neuropsychologists, but the available evidence suggests that different aspects of mathematics are differently affected by compromise of different brain systems. John may well have difficulty with rote learning, tables, and number series. It is important to remember that these in themselves do not constitute one's "math sense", and that with external aids like abacus and calculator for those aspects of arithmetic operations, John may be able to cope with more visually-organized (graphs), spatially-organized geometry or abstract concepts (algebra) which are also mathematics.

The primary learning handicaps have supported a secondary emotional overlay. John's frustration, fear of failure and observation of himself as less skilled and able than any of his siblings (especially his twin) have forced him to find methods of self-generated ego support. This is especially reflected in the WISC-R sub-tests on the Performance area. I perceive John as a boy of at least strong average intelligence, hampered by language and fine motor problems which have caused academic delays since his early years. To cope with his constant failure, John has devised methods of reacting to situations. He has internalized controls on what hyperactivity exists (pencil sharpening, going to the lavatory, getting up to get a book, etc.) and because people have come to accept his distractibility and auditory "figure-ground" problems as part of his seizure problem, he now chooses to use these behaviors whenever he is faced with work threatening to him or perceived as "hard". John does have some problems which caused him to be unable to learn as other students did. Now he has adapted behavioral responses appropriate to the problems and people interacting with him can help him disgard these shields. Punishment will not work but appropriate consistent strategies will. Whatever placement is considered for John, some weight must be given to his self image and fears, not so much of failure, but of being even more different than he perceives himself to be.

Department of Pupil Personnel Services
School Psychologist Report
Date of Examination: 10/10/78
Name: John Smith D.O.B. 5/25/64
School: Ferndale Psychologist: Dr. Green

Referral:

John was referred by his English teacher for an evaluation.

John entered the Meadowbrook School in Sept., 1969 and attended grades K to 6. He was placed in a transitional first grade and repeated third grade. John is presently at the Ferndale School in grade 7, experiencing difficulty. His English teacher, who referred him for assessment, describes him as having difficulty in reading and with grasping sounds of individual letters. He is failing other classes including arithmetic. He has a history of seizures.

John presently attends the Ferndale Junior High. His daily schedule is as follows:

Period I	Geography
II	English
III	Basic arithmetic
IV	Science
Lunch	
V	French
VI	P.E./I.A.
VII	Art/Music - alternating grading periods

Interview with John and His Parents:

Interview was conducted at John's home with John and both parents present. They responded fully and explicitly to all questions asked. At one time, John's twin brother entered the room and John flew at him, yelling for him to get out and that this was none of his business. Mr. Smith removed the brother and his mother calmed John until his father's return when the interview continued.

Family:

The Smith family lives in a residential area of Boston and owns the property they have occupied (single family) for the last 13 years. There are seven children in the Smith family ranging from five to fifteen years of age.

John's parents voiced concerns about John. They said school has always been hard for him, but they feel he uses excuses not to try working harder. It was recommended in K and again in third grade that John repeat. The parents opposed this but they were told that he was immature and would gain time to develop skills. The parents stated that they were told when John was young that he would eventually outgrow his petit mal seizures and so they felt keeping him back might give him time to outgrow these also. John has a younger brother who has some reversal problems and who receives remedial reading help but does much much better academically than John.

John's parents try to help him with his reading, but John gets upset with the continuous prodding to improve. The family agreed to John repeating third grade since they were told he would "catch up" and do better in school. At the time of his retention, he was given Dilantin and Dexedrine for his seizure disorder.

The family feels encouraged about the impending Team Evaluation but concerned about John's performance at the junior high. The mother is very apprehensive about John's academic future.

The family's medical coverage is by Blue Cross/Blue Shield, Employee Family Plan, High Option.

The family isn't adverse to asking for help and are calling into plan all the best resources available - viz. the Medical Center and the 766 Program. The family seems to be cognizant of what is currently available to help improve their's son's situation.

Student

John is a Caucasian 14 year old boy, weighing about 125 lbs. He gets along well with everybody. His mother says he is sensitive but "comes on tough".

John states that his best pal and confidante is his mother to whom he relates all his problems, etc.

Most of John's time is spent playing ball. He participates in family activities, e.g. making ornaments, wreaths, etc. for the Christmas season.

John loves his home but fears his school experiences in junior high. He does not like change of any kind.

John doesn't get along well with his twin brother and picks on him a lot. His brother resents it.

The special group in John's life is his Hockey Team that he is involved with on Saturday mornings from 10:00 a.m. to 12:00 noon.

Behavior During Evaluation:

Rapport was established easily as he was quite talkative and asked a lot of questions. He appeared to have difficulty adapting to the testing situation as he was bothered by extraneous noises and was overly aware of his surroundings. The evaluation took place in my office and John could not proceed on task until he examined and questioned every picture on my wall and items on my desk. Attention span appeared short but he would take direction back to the tasks involved.

I feel his scores are valid indications of his present level of functioning.

Tests Administered:

Wechsler Intelligence Scale for Children - Revised

Information	6	Picture Completion	12
Similarities	5	Picture Arrangement	6
Arithmetic	7	Block Design	14
Vocabulary	7	Object Assembly	9
Comprehension	5	Coding	6
Verbal I.Q.	75	Performance I.Q.	96

Full Scale I.Q. 83

Bender-Visual Motor Gestalt Test

(Clinical Scoring)
Number of errors: 3
Time required: 18 minutes
Implications: Impulsivity and anxiety

Benton Visual Retention

Age Equivalent: 13-9

Peabody Individual Achievement Test

Mathematics: 5.3
Reading Recognition: 5.3
Comprehension: 5.7
Spelling: 4.5
General Information: 7.3
Total Test: 5.5

Informal Assessments/Observations:

It was clear, as the evaluation proceeded, that I was asking John to do things that were stressful for him and in which he has no investment to perform well. He is very distractible and needs a great deal of physical movement. John finds it difficult to persevere with any one task. I observed John in a lab situation at the request of his Science teacher. John moved from one activity to another, alternating between joking and trying to complete the lab assignment. When his teacher sat down with him, there was a long silence, marked by lack of eye contact, finger drumming with sighs. He worked only as long as his teacher sat with him.

Interpretation and Recommendations:

Results of the Wechsler Intelligence Scale for Children - Revised, indicated current overall intellectual functioning to be in the average range of ability. John has strengths in visual skills but only if he is able to function at his own speed for motor activities. His response to the Bender set showed self corrections made through excessive use of time. On another visual-motor task, the WISC-R Block Design sub-test, John scored very well within time limits, but no writing was involved in the response. The discrepancy between the Coding, Block Design, and Picture Association sub-tests show that John is trying to deal with a visual-motor problem.

I gave John the P.I.A.T to see if his responses to a non-verbal, non-motor achievement test would differ from those involving verbalization or writing. I allowed John to answer by simply holding up the number of fingers corresponding to the correct box. Eventually, he verbalized the number and briefly gave the answer. These scores will probably be higher than either the WRAT or other written tests will indicate but I think it shows John to have more of a grasp academically than he has shown prior to this.

John has several problems which hamper academic success. He has visual-motor deficits which he compensates for through use of time. He has poor auditory processing skills especially memory and association so that information must be presented on a very concrete basis. An emotional overlay to his responses was present, indicating anxiety and lack of control coupled with a very poor self image. John is well aware that he doesn't "measure up" to anyone's expectations of a seventh grader and especially his own expectations for himself.

John has learned several strategies on his own for dealing with his problems. He "lets off steam" by moving around or using large muscles. He compensates for his visual-motor problems by taking more time. Both of these strategies do not work to his advantage in classes.

Recommendations include the following:

1. Provide for learning in small group setting.
2. Require oral recitation of directions.
3. Provide preferential seating as free from distraction as possible.
4. Provide for short, frequent work assignments, allowing for difficult tasks to be followed by more pleasurable ones.
5. Provide opportunities for conspicuous success.
6. Provide individual instruction with tutor if possible.
7. Consider .3 program placement with support in necessary classes.

Medical Assessment Summary:
Student: John Smith
D.O.B.: 5-25-64 Date of Report: 9/30/78

I examined John on September 30th as part of his full Team Evaluation. He was referred to me by his parents for this examination. John has been my patient since birth, as has his family.

Reviews and Examinations:

A review of John's history shows a child born one month prematurely with no congenital or chromosomal abnormalities. He does have some Central Nervous System disorders and has a past history of seizures, etiology unknown. He has not had any hospitalizations, trauma or accidents. Remarkable is the delayed aspect of his language and social development.

Physical examination shows a well nourished fourteen year old boy with a height of 65" and weight of 129 pounds. The physical examination shows no remarkable areas with the exception of speech mechanism which appears delayed, impaired perceptual function and fine and gross motor function and reflexes.

The overall picture presented by John is that of a physically well-developed young man with notable deficiencies in perceptual development, speech, and fine and gross motor function.

It should be noted that John is presently on 150 mg. of Dilantin daily for seizure control.

Pupil Personnel Services
Speech and Language Report
Date of Examination: October 4, 1978
Name: John Smith D.O.B.: 5/25/64
School: Ferndale Speech/Language Therapist: M. Blue

Referral:

John Smith, age 14 years, 5 months, was seen for a speech and language evaluation in October, 1978. John, one of seven children, is in the seventh grade and is reported to have difficulty with reading, math, spelling and auditory memory tasks, as well as adjustment to the junior high environment.

Behavior During Evaluation:

Evaluation took place in Room 6A in the services center. John came willingly to be tested and, after some initial reticence, responded as best he could to the tasks given him. Room 6A is designed for evaluations and there were no distractions or competing activities conflicting with the tests. I feel John did his best on these tests and the scores are representative of his ability in these areas. I observed John in an English class and found that he exhibited the same types of language patterns shown on the tests.

Tests Administered:

1. Peabody Picture Vocabulary Test - Form B
   CA 14-5
   MA 12-3
   IQ 89
   %ile: 25th

2. Spencer Sentences for Memory:
   Digits: 9-3
   Sentences: 11-1

3. Wepman Auditory Discrimination Test: Below Adequate

4. Goldman - Fristoe - Woodcock Test of Auditory Discrimination:
   Quiet Test: 75%
   Noisy Test: 30%

5. Token Test: Performed at 13 year level

Informal Assessments/Observations

Conversations with John shows he has the ability to communicate in simple sentences with some syntactical and morphological errors and with marked dysfluency. He seemed willing to respond and yet unable to understand what was asked of him.

Q: Do you have sisters?
A: Yes, seven. Four girls and three boys.

Similar types of responses were seen in the classroom.

Q: John, where is the adjective?
A: "I thought you was saying, um, um, I forget, um, oh, I forgot you were saying, um..."

He seemed embarrassed at such times and covered himself by responses such as "Oh, I forgot" or "Who cares anyway?" or "Big deal!"

Interpretation and Recommendations:

John appeared to need a highly structured testing situation where verbal stimuli could be presented slowly and repeated. Because this one-to-one situation of calm undistracted presentation is almost impossible to duplicate in the classroom, John's performance in the classroom is most likely more impaired than these scores indicate. His performance in language indicated global difficulties with receptive/processing and expressive language abilities. His receptive vocabulary is little more than two years below his chronological age. His short-term memory is reduced from chronological age expectations by between 3 and 5 years.

If John was given a task which did not require a verbal response, he could perform close to his age level. During several of the tests he repeated directions aloud accurately, but then performed the action incorrectly. Although his hearing is not impaired, he has a great deal of trouble discriminating sounds and did so poorly on the Wepman. I administered the Goldman-Fristoe-Woodcock. His discrimination was impaired on the quiet sub-test, on the noisy sub-test he could hardly focus on any of the commands, despite performing them correctly earlier in the quiet setting.

John's problems with memory and discrimination complicate his expressive/receptive language difficulties. He is unable to monitor his own responses and although he can echo what he is to do, this repetition should not be interpreted as understanding what is requested. His very low I.Q. score on the PPVT is indicative only of low receptive vocabulary and should NOT be considered a valid indication of intellectual ability.

Some forms of external cueing used during the evaluation seemed to help John in some of his performances. Cues used with success were:

1. Asking John to repeat, think about what he had repeated, explain the repetition in his own words, and then operate accordingly.

2. Providing John with visual cues whenever possible to explain task demands.

3. Providing phonetic cues for retrieval of target words.

In view of the above evaluation, it is suggested that:

1. John be placed in a small, highly structured classroom where language stimulation is an integral part of his total program.
2. John should receive speech and language therapy for a minimum of one-half hour, three times per week, focusing on receptive vocabulary skills, short-term memory skills, improving phonetic skills, teaching strategies for word retrieval, sequencing activities and vocal resonance.
3. Everyone who interacts with John should present information slowly, clearly, and allow sufficient time to process information.

ACTIVITY FOUR: DEVELOPING AN IEP

Purpose

This activity serves as a review for all the skills introduced in the training materials up to now. In your groups, you will simulate a Team Evaluating Meeting and develop an IEP for John using the decision-making tools and criteria for the components of the IEP introduced in the training materials in Modules One through Four.

Instructions

1. Select an Evaluation Team Leader for this simulation, then decide which role you would like to play. You can choose from the following list:

   Team Recorder
   M. Bell - Principal
   M. Blue - Speech/Language Therapist
   S. Green - School Psychologist
   M. Gray - Generic Specialist
   O. Winter - Neuropsychologist
   G. Nelson - English Teacher
   S. Madros - Resource Teacher
   Mrs. Smith - John's Mother
   Mr. Smith - John's Father
   J. Summer - Medical Doctor

2. If your group does not have twelve members, you can eliminate the following roles: O. Winter, Mr. Smith, John and/or M. Bell.

3. Individually read over the entire case study found on pages 64-77 and prepare your notes. The Team Evaluation Leader should allow thirty minutes for this task.

4. In developing the IEP, utilize the group process and decision-making skills relative to developing IEPs introduced in previous training sections. Each member of the Team should try to exercise assertiveness and reach group consensus concerning the components of John's IEP. The Team should begin by reaching consensus on the following:

   a. the "major concerns"

   b. student profile

   c. levels of performance

   In order to reach consensus, each Member should prepare an outline (before the simulation begins) of the information in their reports concerning student profile and levels of performance. Reports should not be read or summarized. Rather, information should be shared by all Team Members relative to these issues.

Once these are determined, general goals can be written and priorities set. These components should serve as a guideline for developing the remaining sections of the IEP. (Refer to materials on the internal consistency of the IEP presented in Module Three if necessary.)

5. The Evaluation Team Leader should carefully read the role of the Special Education Coordinator presented in Activity Three. After the approximately thirty minutes, the Evaluation Team Leader should begin the role play. (See pages 80-81)

6. The Team Recorder should record the Team's decisions on the IEP found on pages 82-85.

ROLE OF EVALUATION TEAM LEADER

You are the special education coordinator for the district in which John is enrolled. You are also the local education agency (LEA) appointed session leader of this meeting. Your tasks are:

(1) To begin the meeting by introducing yourself, M. Doe, Special Education Coordinator and Team Leader. Ask each participant to introduce himself/herself (name and position).

(2) To clarify the goals of the session. One means for accomplishing this objective is to establish an agenda. Use newsprint on which to write this agenda. You may solicit these items from the group; however, be certain to include:

  a. sharing of information from each participant based on major concerns. (List major concerns on newsprint, e.g., John's language disability and his strengths and weaknesses -- academic, cognitive, motor.)

  b. designating student profile and physical constraints.

  c. establishing levels of performance.

  d. developing student centered goals.

  e. designating teaching approach/methodologies.

  f. selecting an evaluation and monitoring plan.

  g. developing specific student centered objectives.

  h. selecting a service delivery plan

  i. developing a statement on the criteria for John's move to a less restrictive prototype.

  j. completing the additional information section and coversheet of the IEP.

(3) To maximize participation and understanding. Some of the techniques for achieving this task are:

  a. Listen actively. Establish eye contact with all participants. Nod your head when someone speaks. Be involved at all times.

  b. Regulate the flow of conversation. Keep the conversation moving, for example, during information sharing, ask participants to summarize their comments. Try to keep each participant's discussion limited to ten minutes.

c. Redirect comments. Attempt to tie conversation together. Direct comments to other individuals who may have something to say on the same topic.

d. Probe. Try not to ask "yes-no" questions. If a participant does respond with partial information or "yes-no" answers, ask them leading questions. Try to get as much information as possible (of course, don't be rude).

e. Restate information. This insures that comments are understood by the entire group.

f. Ask participants who use technical language to define terms presented.

g. Ask participants to clarify whether their statements are informational inferential, or judgmental.

h. Summarize major points (e.g., education level) and place these points on newsprint.

i. Attempt to resolve conflicts by striving for workable compromises. Assist participants in finding points upon which they can all agree.

j. Assist participants in clarifying comments by using such statements as "I think I hear you saying...Is that correct?"

Type of TEAM meeting: ____________
Meeting date: ____________
Plan covers the period from:
____________ to ____________
Liaison name: ____________
Liaison position: ____________

Identification No.: ____________
School: ____________
Grade: ____________
Student's dominant language: ____________
Language of home: ____________
Prototype: ____________

INDIVIDUALIZED EDUCATIONAL PLAN

Student Name: ____________ Birthdate: ____________ Home Phone No.: ____________

Parent(s) Name(s): ____________ Address: ____________ Work Phone No.: ____________

TEAM PARTICIPANTS

Signature, if in attendance	Name	Role/Assessment Responsibility
		Chairperson/

I certify that the goals stated in this plan are those recommended by the TEAM and that the indicated services will be provided.

Principal: ____________ (Signature/Date) Special Education Administrator: ____________ (Signature/Date)

If placement outside the local education agency is recommended, I certify that the facility, ____________ (Name/Address) is able to provide the services stated in this plan.

Director of Accepting Facility: ____________ (Signature/Date)

RESPONSE – Circle one: Parent(s)/Guardian/Surrogate parent/or Student over age 18, sign next to your choice, and comment if you wish.

I accept the educational plan. ____________ (Signature/Date) Comments: ____________

I do not accept the educational plan. ____________ (Signature/Date) ____________

I postpone a decision until an independent evaluation is completed. ____________ (Signature/Date) ____________

STUDENT PROFILE:

ADDITIONAL INFORMATION:

SPECIAL EDUCATION SERVICE DELIVERY: Type of Service	Focus on Objective Numbers	Type of Setting					Location	Personnel	Projected Date Service Begins	Frequency and Duration of Service per Day/Week	Total Hours per Week
		Class	Small Group	Individual	Regular	Special					
Total hours of special education service delivery per week											

CRITERIA for movement to next less restrictive prototype:

IF OTHER THAN REGULAR, state the annual duration of program ________ days, daily duration of program ____________ hours, and transportation plan:

CURRENT PERFORMANCE LEVEL	GENERAL STUDENT CENTERED GOALS	PRIORITY NUMBER	TEACHING APPROACH AND METHODOLOGY MONITORING AND EVALUATION TECHNIQUES SPECIALIZED EQUIPMENT AND MATERIALS

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Goal Number	Objective Number	SPECIFIC STUDENT CENTERED OBJECTIVES	Quarters during which objectives will be addressed			
			1	2	3	4

CRITERION TEST — MODULE FOUR

1. List four types of information that should be included in an assessment report.

   a. ______________________ c. ______________________

   b. ______________________ d. ______________________

2. Assessment information should come from multiple sources. List three of these sources.

   a. ____________________ b. ____________ c. ____________

3. Bias can occur in assessment information. Give two examples of such bias:

   a. ____

   b. ____

4. MATCHING:

___ a.	Inferential statements	1. A process skill
___ b.	Informational statements	2. Assist in goal clarification
___ c.	Judgmental statements	3. Statements based on quantifiable information
___ d.	Active listening	4. A right stressed in assertiveness training.
___ e.	An agenda	5. Statements one step removed from the actual fact.
___ f.	Assumption of responsibility	6. Should be developed at a group meeting.
___ g.	Educational levels of performance	7. Usually in the form of recommendations; statements about what action should be taken.

5. TRUE-FALSE:

   a. ___T ___ F Collapsed scores (e.g., grade levels) are sufficient information on diagnostic reports.

   b. ___T ___ F Major concerns of those referring the child should guide the assessment team in its information-gathering.

   c. ___T ___ F Assessment information should be relevant to program planning.

   d. ___T ___ F The type of information (e.g., norm-referenced tests) can influence the group decision-making process.

   e. ___T ___ F Very few tests are biased in their content.

f. ___T ___ F Assessment information should come from multiple sources.

g. ___T ___ F Group dynamics do not affect the completion of a task.

h. ___T ___ F Inferential and judgmental statements should not be used in diagnostic reports.

i. ___T ___ F Non-verbal communication is an important aspect of group dynamics.

j. ___T ___ F The level of participation in the group can affect the individual's satisfaction with the results of the decision-making process.

6. Match the following comments with the example of group process skill:

   a. Mr. Doe, you said that you feel John is hyperactive. Can you give us examples?

   b. M. Jones, I think you said that you don't understand John. Is that what you said?

   c. Uhm huh. Another person is speaking.

   d. The major points of this discussion so far seems to be ...

   e. M. Doe, that print is interesting but we are discussing ...

   f. Let's hold our discussion on this point to ten minutes.

   1. Active listening

   2. Redirecting comments

   3. Summarizing

   4. Clarifying comments

   5. Probing

   6. Controlling flow of the conversation.

MODULE FIVE

THE INDIVIDUALIZED EDUCATIONAL PLAN: REVIEW AND REVISION

PARTICIPANT'S MANUAL

INTRODUCTION TO MODULE FIVE

The purpose of this module is to introduce you to the review and revision process of the IEP. A review is the evaluation of the student's program and placement; revision is the change in the IEP based on the results of the review. Case materials are used to illustrate the review and revision process.

OVERVIEW OBJECTIVES

After completing this module, you will be able to:

1. describe the purposes for review and revision
2. specify the who, what, when, where and how of review
3. write a quarterly progress report
4. write a new IEP based on summaries of quarterly progress reports.

CRITERION TEST

TRUE-FALSE

T F 1. According to Chapter 766, the review of goals and objectives should occur quarterly and annually.

T F 2. A review of the IEP can occur at any time.

T F 3. Revision of the IEP can occur only quarterly.

T F 4. Students should not participate in the review/revision process.

T F 5. Review is a continual, on-going process.

SHORT ANSWERS

1. List two reasons for a review.

2. List two individuals who must participate in the review meeting.

3. List two outcomes of the review process.

4. Outline the decision-making model of which the review/revision process is a phase.

5. What are at least three questions which should be addressed at the review/revision meeting(s)?

REVIEW AND REVISION OF THE IEP

One of the most critical components of the IEP process is the review/revision phase. Without adequate attention to this phase, there are no assurances that the child is receiving an appropriate, individualized educational program. If the IEP process is viewed as a decision-making process, the review/revision phase is extremely important in that it provides the feedback by which the system is able to review its efforts at both the case level and the systems level.

Morrissey and Safer (1976) describe this phase:

> This phase refers to periodic evaluation of conditions prescribed in the IEP plan and implemented in the IEP in terms of pupil progress. It represents the formative assessment of such progress with the intent to make, when warranted, necessary revisions-additions, deletions, or modifications to the original IEP. (p. 14)

Tracey, Kladder, and Gibbons (1976) discuss the specific concerns of the review process:

> Both elements of information specification and placement are considered in review, but the focus is on their interface. Review, like placement, has a process focus of being behaviorally contingent, that is, set in time and space. The principles and safeguards of due process apply and this checklist generated for placement can also be used in review. Review has been described as the description of the individual in interaction with his educational plan and placement. Although this is often viewed as the last phase in a line model, it actually serves as a feedback loop to re-assessment, if in review, the Case Conference Committee finds that there has been a satisfactory solution to the problem. (p. 10)

The review and revision phases are viewed as integral steps in the decision-making process. Important to the decision-making process is the utilization of feedback concerning the consequences of decisions made by the system's participants. Decision-making without adequate attention to appropriate feedback results in an ineffective process for renewal of the student's program.

Several purposes for the review/revision process have been noted by special educators. According to the National Association of State Directors of Special Education (NASDSE) (Walker, 1976), the purposes of the review/revision phase are:

> (a) it allows the implementers to make spontaneous changes in the IEP based upon systematic feedback from the child and (b) it provides the committee with data that can be used in judging the appropriateness of the plan and the quality of the implementation. (p. 41)

Morrissey and Safer (1976) and Lilly (1977) note that the review process is also for the purpose of accountability, for the "delivery of instruction prescribed in the IEP plan" (Morrissey & Safer, 1976, p. 16) and for the implementation and monitoring of the rules and regulations of the IEP provisions of the law (Lilly, 1977). However, Morrissey and Safer (1976) caution against use of review solely for accountability purposes. They state:

> The annual assessment may prove to be nothing more than compliance with 'legal process' mandated by the law and as such not expediate functional educational decision making. If, however, information from the review/revision phase is considered in conjunction with the information from the original IEP plan then the annual assessment may assume a more viable character from which truly functional educational decisions may emerge (p. 16)

The review/revision process should not be viewed as a procedure that generates meaningless paperwork; instead it must be viewed as an integral part of the entire IEP process. All initial decisions concerning the student's program must be considered tentative; the on-going review process enables the participants to change the nature of the program as needed.

Data Collection for Review and Revision

Direct and continuous monitoring techniques and devices accurately describe the student's progress (Van Etten and Van Etten, 1976). This type of measurement is a direct assessment of the student's progress after a given interval. Criterion-referenced, teacher made tests and systematic observations are considered to be direct measures of what the student is learning. (See Module Three)

Recording Procedures

Service providers should select recording procedures that are easy to use, are appropriate for the data being collected, and that clearly communicate the results (Archer, 1976). Checklists, tally sheets, and coding sheets can be used to record the data. The following is an example of a tally sheet for an observation system:

Name: John Doe
Behavior: Hitting students on the playground
Time: 10:00 - 10:15
Day - 1/4/79

These recording systems should be as simple as possible. Developing standard sheets that contain behaviors that can be checked off or spaces for filling in information can save the service provider time.

Interpeting Data

To analyze the student's performance over a specified period of time, the service provider can compute the data, e.g., percentages, and use graphs or charts (Archer, 1976). These graphs or charts can be used for summarizing changes in a student's behavior and for quarterly and annual reviews. Also, periodic reviews of the data can enable the service provider to change the student's program whenvever needed. For example, monitoring the student's progress in learning to read via the "sight approach" may indicate that the student is not making progress. Therefore, the teacher should revise the strategies and utilize an alternative approach.

Review and Revision: The Law

The review and revision of the student's IEP is specified in the Massachusetts Chapter 766 Regulations handbook. The State requires a ten month and annual review, quarterly reviews and 3 year re-evaluations.

According to the regulations, the annual review is conducted as follows:

> +333.1 The Administrator of Special Education, the parents, and the person(s) providing the major services to the child under the IEP shall meet and make a careful review of the child's progress based upon the quarterly progress reports submitted by the TEAM Liaison under 337.1 and the observations of those working with the child. At least ten days prior to the review meeting with the Administrator of Special Education shall invite in writing the child's parents and, where appropriate, the child, to attend and participate in the review meeting. The Administrator of Special Education or the parents may at their discretion invite other person(s) who have worked with, are working with or will be working with the child to attend the review meeting.

+333.2 The participants in the review meeting shall determine:

333.2 (a) Whether the child has achieved the goals set forth in the IEP.

333.2 (b) Whether the child has met the criteria which indicate readiness to enter a less restrictive program as defined in 322.2.

333.2 (c) Whether the program the child is in should be specifically modified to make it more suitable to the child's needs.

333.2 (d) Whether it is desirable to refer the child for a full or intermediate re-evaluation. When it is anticipated the child will need a more restrictive prototype (prototype 502.3 through 502.6) the child shall be referred for a full evaluation under 321.0. Parental consent shall be obtained prior to the re-evaluation.

+333.3 The participants in the review meeting shall write a new IEP for the child, in accordance with 335.0; provided, however, that if a re-evaluation of the child is scheduled in accordance with 333.2(d) and 334.0 the writing of the new IEP shall be deferred until completion of the evaluation, and a written summary of the review meeting shall be conveyed to the parent within ten days after the review meeting.

The regulations also state that the IEP be reviewed quarterly. The quarterly review is the responsibility of the liaison whose duties include the following:

337.1 Monitor the child's progress toward reaching the goals set in the IEP, and submit written reports on such progress, at least quarterly, to the child's parents, to the TEAM chairperson, and to the administrator of the school or facility in which the child's program is provided.

337.2 Recommend to the TEAM chairperson at any time after implementation of the child's IEP, any modification of the IEP (other than a change of prototype) that should be made pending the required ten-month or annual review. Upon approval by the Administrator of Special Education and the TEAM chairperson, and with the consent of the child's parent, the Administrator and chairperson shall modify the IEP.

337.3 Recommend to the Administrator of Special Education at any time after implementation of the child's IEP, any re-evaluation of the child that should take place pending the ten-month or annual review. Upon approval by the Administrator, and with consent of the child's parent, the Administrator shall arrange for the re-evaluation.

In addition to quarterly or annual review, the regulations provide for a "re-evaluation" component which is specified in Paragraph 334.0;

> Each school committee shall provide a full or intermediate re-evaluation for the child when such re-evaluation is recommended by a participant in a review meeting under 333.1 who comes within one of the categories listed in 316.0. Parental consent shall be obtained prior to the re-evaluation, and all of the provisions in this chapter pertaining to full and intermediate evaluation shall pertain to full and intermediate re-evaluations. Subject to parental consent, the school committee shall no less than every three years provide a re-evaluation of each child who has been placed in a special education program.

REFERENCES

Lilly, S.M. "Evaluating Individualized Education Programs". In S. Torres (ed.), A Primer on Individualized Education Programs for Handicapped Children. Reston, VA: The Foundation for Exceptional Children, 1977, pgs. 26-31.

Massachusetts Department of Education, 766 Regulations. September 1976.

Morrissey, P. and Safer, N. The Individualized Education Program: A Working Paper. Washington, D.C.: Department of Health, Education and Welfare, Office of Education, Bureau of Education for the Handicapped, 1976.

Tracy, M.L., Gibbons, S., and Kladder, F.F. Case Conference: A Simulation and Source Book. Bloomington, Indiana: Developmental Training Associates, 1976.

Walker, J. (ed.) Functions of the Placement Committee in Special Education: Resource Manual. Washington, D.C.: National Association of State Directors of Special Education, 1976.

REVIEW/REVISION PROCESS

. . . A periodic evaluation of conditions prescribed in the I.E.P. It represents the formative assessment of the existing I.E.P. to make revisions, additions, deletions, or modifications, if necessary.

MORRISSEY AND SAFER, 1976

. . . Review is the description of the individual in interaction with his educational plan and placement.

GIBBONS, TRACY, and KLADDER, 1976

PURPOSES FOR REVIEW AND REVISION

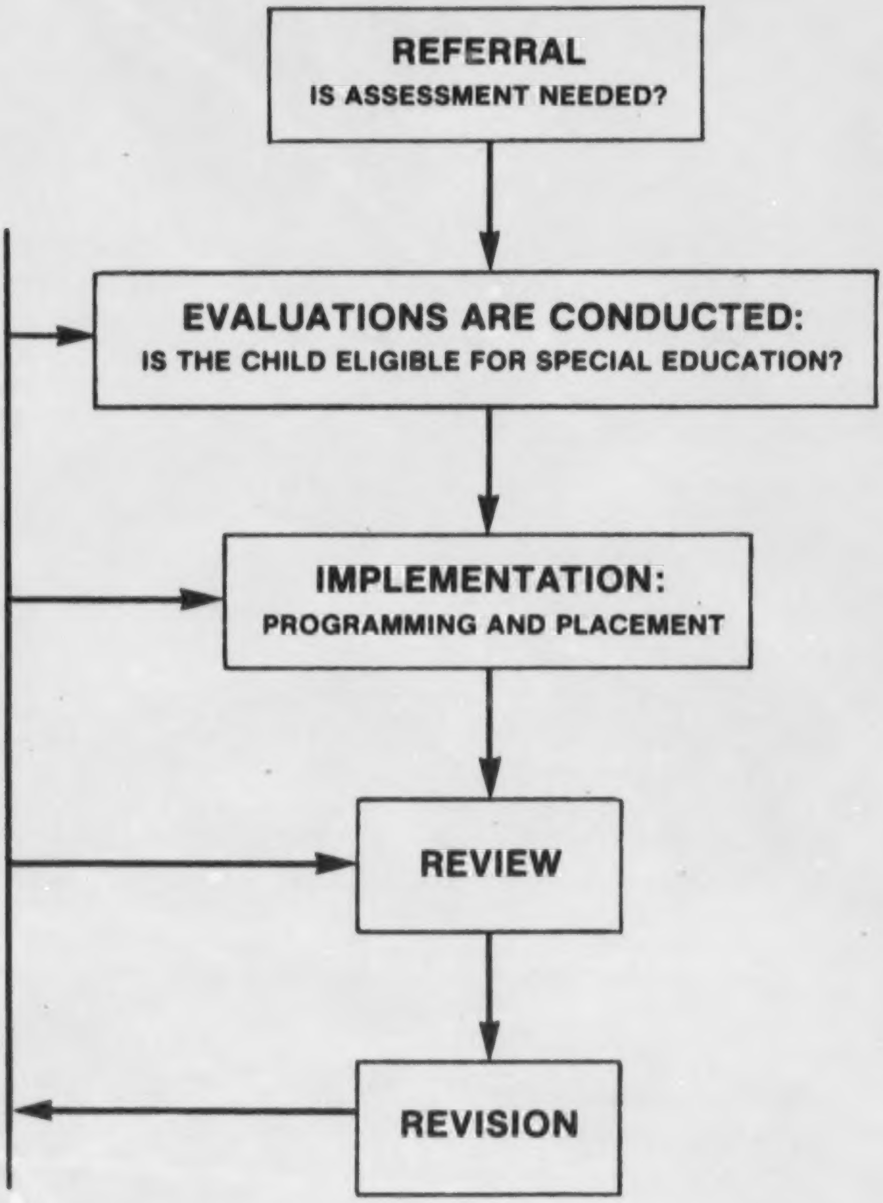
1. ALLOWS THE IMPLEMENTERS TO MAKE CHANGES IN I.E.P.'S BASED UPON SYSTEMATIC FEEDBACK FROM THE CHILD'S PERFORMANCE.

2. PROVIDES THE EVALUATION TEAM INFORMATION THAT CAN BE USED IN JUDGING THE APPROPRIATENESS OF THE PLAN AND THE QUALITY OF IMPLEMENTATION.

3. MAKES LOCAL, STATE, AND NATIONAL OFFICIALS ACCOUNTABLE FOR THE AVAILABILITY OF INDIVIDUAL PROGRAMMING NEEDS.

5.3

REVIEW/REVISION: CRUCIAL STEPS IN THE DECISION-MAKING PROCESS


REFERRAL
IS ASSESSMENT NEEDED?
EVALUATIONS ARE CONDUCTED:
IS THE CHILD ELIGIBLE FOR SPECIAL EDUCATION?
IMPLEMENTATION:
PROGRAMMING AND PLACEMENT
REVIEW
REVISION

REVIEW AND REVISION PROCESS

WHAT TO REVIEW AND REVISE

- STUDENT PROFILE
- LEVELS OF PERFORMANCE
- GENERAL GOALS
- TEACHING APPROACH/
- METHODOLOGY
- SPECIFIC OBJECTIVES
- EVALUATION PROCEDURE
- SERVICE DELIVERY
- CRITERIA FOR MOVEMENT

WHEN

... AT LEAST ANNUALLY (P.L. 94-142)
... QUARTERLY AND ANNUAL (SENATE BILL 766)
... WHEN REQUESTED BY PARENT(S), SERVICE PROVIDERS, AND STUDENT (WHEN APPROPRIATE)
... EVERY THREE YEARS

WHO

... PARENTS
... STUDENT
... SERVICE PROVIDERS
... LIAISON

FORM

... TEAM
... SERVICE PROVIDERS AND PARENTS

HOW

... DIRECT AND CONTINUOUS MEASUREMENT

- Criterion tests, observations systems, informal tests, charting behavior, rating scales, checklist interview.

OUTCOME

... POSSIBLE CHANGES IN:

- Student Profile
- Levels of Performance
- General Goals
- Teaching Approach/ Methodology
- Specific Objectives
- Evaluation Procedure
- Service Delivery
- Criteria for Movement

... AN INTERMEDIATE OR FULL RE-EVALUATION IS WARRANTED
... NEW IEP (ANNUALLY)

RE-EVALUATION

§ 334.0 RE-EVALUATION OF THE CHILD

Each school committee shall provide a full or intermediate re-evaluation for the child when such re-evaluation is recommended by a participant in a review meeting. Parental consent shall be obtained prior to the re-evaluation, and all the provisions in this chapter pertaining to full and intermediate evaluations shall pertain to full and intermediate re-evaluations. Subject to parental consent, the school committee shall no less than every three years provide a re-evaluation of each child who has been placed in a special education program.

POSSIBLE REASONS WHY STUDENTS DO NOT ACHIEVE THE GOALS AND OBJECTIVES OF AN IEP

... THE GOAL WAS NOT APPROPRIATE

... SPECIFIC OBJECTIVE WAS INACCURATE

... THE STUDENT DID NOT HAVE PREREQUISITE SKILLS

... TEACHING APPROACH AND METHODOLOGY INACCURATE

... MATERIALS WERE NOT AVAILABLE

... TEACHER DID NOT USE THE PLAN

... TEACHER DID NOT HAVE THE SKILLS TO IMPLEMENT STRATEGIES OR ADAPT MATERIALS

... STUDENT MADE PROGRESS IN AREAS OTHER THAN THOSE INDICATED IN THE IEP

ACTIVITY ONE: THE QUARTERLY PROGRESS REPORT

Purpose

The purpose of this study is to engage you in the decision-making process regarding the quarterly review and revision phase of the IEP.

Instructions

1. Read the reports.

2. Answer the questions on page 19.

Progress Report Submitted to M. Gray (liaison for John Smith)
February 15, 1979
M. Blue/Speech and Language Therapist

Goal: John will increase his responses from simple to compound sentences.

Objective: Given increased number of word cubes, John will devise complete sentences of increased complexity.

Observation: John had some initial difficulty relating the cubes and words. We began on a very basic level involving two cubes and are now working on fairly complex sentences, using descriptors and modifiers with eight to ten cubes. This represents a growth from the echoed "Balls fall" to "Large bouncing balls knock dishes and glasses off low tables." John seems to be very proud of his present ability to pyramid responses.

Goal: John's vocabulary comprehension will increase from concrete to associative concepts.

Objective: Given a set of 4 common objects, John will verbally designate similarities and differences between those objects with 95% accuracy.

Observation: John reached this objective several weeks ago. However, his other teachers report that he is still using simple and concrete language. After questioning John about this, I learned he does not feel "right" about using "big" words outside of my room, because he feels that the other students will make fun of him.

M. Blue
Speech/Language Therapist

Progress Report Submitted to M. Gray (liaison for John Smith)
February 15, 1979
Susan Madras, Resource Teacher

Goal: John will master patterns in decoding involving recognition and use of vowels and consonant forms.

Objective: Given a series of 12 cards with c-v-c forms of ascending difficulty, John will select and write designated words and nonsense syllables with 100% accuracy.

Observation: John is doing very well on the 6th grade word cards. I had some trouble initially getting him to work. Because we had to go back to early sound/symbol relationship, he regarded the work as "baby stuff". Since I could show him in the teacher's edition that the work was on a 6th grade level and the content on a junior high level, he is much more interested. He wants to finish as much as he can as quickly as he can to see if he can "beat his brother".

Goal: John will master all components of the process of subtraction of whole numbers.

Objective: Given ten examples of three step mathematical sentences, John will calculate the solution with 100% accuracy.

Observation: I think John's goals have to be readjusted upward. Initially, he made many errors in subtraction which seemed to show a lack of basic comprehension of processes. Informal tests given him earlier in the quarter showed errors such as using a minuend or subtrahend as a remainder, increasing minuend digit after borrowing, subtracting the minuend from the subtrahend instead of borrowing, or unilaterally borrowing from all digits when only one instance was needed.

Once he could "see" the process using the rods, John needed little more explanation. John uses his fingers, but presently he is working on memorizing multiplication facts, having mastered subtraction. He enjoys setting up problems for students still having difficulty. John is quite pleased with his success, however, he is teasing other students who cannot catch on as quickly as he did.

Progress Report Submitted to Susan Madras, Resource Teacher
February 15, 1979
M. Gray, Generic Specialist

Goal: John will use his visual skills to increase his successful participation in academic subjects following modification of presentations.

Objective: Following explanation of concepts utilizing visual and manipulative aids, John will demonstrate understanding of lesson through taped feedback of main points.

Observation: The success of his classroom participation depends upon several variables, including the approach of the teacher. John had to be sent out of one class when John's teacher announced to the entire class that John had to have special materials for class work. John refused to do any work that period and interrupted the teacher 8 times in 10 minutes. According to reports from his other teachers, John's academic skills are improving. He received a failure notice from his Government teacher. According to the warning report, John is unable to perform in class or keep up in class. He is disruptive and does not use the materials the teacher gives him.

Goal: John will develop his self-image and become able to recognize his strengths and weaknesses.

Objective: Given the opportunity to explore value clarifications through priority listing, John will verbally demonstrate knowledge of his personal goals as feedback following listing with 100% accuracy.

Observation: Following the in-service last month, John's Social Studies teacher became very interested in the process of values clarification. His class deals with the issues of control and understanding now as part of the curriculum. For this reason, this goal is being met in the classroom rather than through out of class services. The teacher's enthusiasm for the process certainly helps and John is learning with the other members of his class.

M. Gray
Generic Specialist

Progress Report Submitted to M. Gray (liaison for Mr. Smith)
February 15, 1979
S. Green, School Psychologist

Goal: John will increase his ability to cope with frustration through learned techniques.

Objective: Given a description of two situational circumstances, John will verbally predict consequences of an action with 100% accuracy.

Observation: John can now verbalize what he *ought* to do in situations but he is still "striking out" in actual situations. He is having a great deal of trouble in his Government class. In speaking with the teacher, I am hearing that John is obstreperous and being spoiled by the system and catered to through the special materials. The teacher has not been able to document John's outbursts, e.g. when, how many, why, etc. In speaking with John, I hear that he doesn't like this teacher and neither do any of his friends.

John's degree of control in other school situations has improved significantly in that he no longer gets angry or storms out of class. During this next quarter, some emphasis must be made on alleviating the problem in Government.

S. Green
School Psychologist

QUESTIONS

1. What difficulties are indicated by the Generic Specialist and the psychologist? Why? What revisions would you make?

2. Do you feel there needs to be any major revisions of John's program or placement at this time? Why or why not?

3. You are the liaison for John. Write a quarterly report of John's progress toward his goals as indicated by the reports.

ACTIVITY TWO: THE ANNUAL REVIEW

Purpose

The purpose of this activity is to engage you in the decision-making process for the annual review.

Instructions

1. Choose one of the following roles:
   a. Special Education Coordinator
   b. M. Gray (Generic Teacher and liaison)
   c. S. Madras (Resource Teacher)
   d. M. Blue (Speech and Language Therapist)
   e. S. Green (School Psychologist)
   f. John (optional)
   g. John's mother
   h. John's father (optional)
   i. Principal (optional)

2. Review John's IEP found on pages 27-28 and prepare your role. You will have one half hour to do this.

3. Your task is to establish a new IEP for John by:
   a. Reviewing John's student profile and make the necessary changes.
   b. Update John's current levels of performance
   c. Establish new goals for John.
   d. Review teaching approach methodology and evaluation plan stated in the original IEP for John. Make any necessary change.
   e. For purposes of this role play, it is not necessary to write new specific objectives for John.
   f. Write a service delivery plan for John and complete the additional information section.
   g. Designate the criteria for movement to the next less restrictive prototype.

   The liaison should record the Team's information in the IEP found on pages 29-32.

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Type of TEAM meeting: Full
Meeting date: 11-7-78
Plan covers the period from:
11-7-78 to 11-7-79
Liaison name: Madeline Gray
Liaison position: Generic Specialist

Identification No.: 100-78-03472
School: Ferndale Jr. High
Grade: 7
Student's dominant language: English
Language of home: English
Prototype: 502.2

INDIVIDUALIZED EDUCATIONAL PLAN

Student Name: John Smith
Birthdate: 5-25-64
Home Phone No.: 617-476-1212
Parent(s) Name(s): Mr. and Mrs. Ralph Smith
Address: Friar Tuck Rd. Farmingdale
Work Phone No.: 617-755-2121

TEAM PARTICIPANTS

Signature, if in attendance	Name	Role/Assessment Responsibility
	George F. Doe	Chairperson/
	Mary Bell	Principal
	Maureen Blue	Comm. Dis. Spec.
	Simon S. Green	School Psychologist
	Madeline Gray	Generic Specialist
	Oscar N. Winter	Neuropsychologist
	Gwen Nelson	English Teacher
	Susan Madras	Resource Teacher
	Phoebe Smith	John's Mother
	Ralph Smith	John's Father

I certify that the goals stated in this plan are those recommended by the TEAM and that the indicated services will be provided.

Principal: Mary Bell, M Bell 11-7-78 (Signature/Date)
Special Education Administrator: George F. Doe, George F. Doe 11-7-78 (Signature/Date)

If placement outside the local education agency is recommended, I certify that the facility, ____________ (Name/Address)
is able to provide the services stated in this plan.

Director of Accepting Facility: ____________ (Signature/Date)

RESPONSE – Circle one: Parent(s)/Guardian/Surrogate parent/or Student over age 18, sign next to your choice, and comment if you wish.

I accept the educational plan. Mr. Ralph Smith, 11/7/78 (Signature/Date) Comments: ____________

I do not accept the educational plan. ____________ (Signature/Date) ____________

I postpone a decision until an independent evaluation is completed. ____________ (Signature/Date) ____________

FRONT OF FORM

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STUDENT PROFILE: The Team evaluation identified John's strengths as visual association and memory, visual reasoning and non-verbal responses. John's visual motor skills are not strong, but he has learned to compensate for this by taking more time to perform tasks, such as writing or drawing. John's weakest skills include auditory channel processes. He has poor auditory memory, auditory association and auditory discrimination. He also has poor receptive and expressive language skills. These weaknesses are the cause of John's problems in math, reading and other content area subjects. With a history of seizures and hyperactivity, John has problems paying attention and controlling his behavior. He has a very poor self image and his approach to frustration in the classroom has been to "laugh it off" or become disruptive and so appear "tought" in the eyes of his peers. His weaknesses have affected his academic achievement so that his basic skills (i.e. reading, spelling, math) are on about a fourth grade level.

John will work best in a structured, flexible classroom where what is expected of him is clearly defined. All verbal instruction should be accompanied by visual materials and/or demonstration. Efforts in the regular classroom should work toward providing success through realistic academic expectations. John has a basic understanding of vocabulary on about a seventh grade level but, because he cannot accurately recall or associate what he hears, verbal information appears unconnected to him. In expressing himself, John can function better through motor activities rather than abstract discussions. Showing is easier than telling for John but, when testing in content area instruction, allowing John to tape responses or answer on a one-to-one basis will help analyze content mastery without (see back of sheet)

ADDITIONAL INFORMATION: John will attend all of his present classes with the exception of French and English. He will spend these two periods in the Resource Room. He will attend family counseling sessions at the Hubert Mental Health Clinic, one session per week. In addition, the school psychologist will act as liaison between clinic and school with the aim of alleviating school adjustment problems

SPECIAL EDUCATION SERVICE DELIVERY Type of Service	Focus on Objective Numbers	Type of Setting					Location	Personnel	Projected Date Service Begins	Frequency and Duration of Service per Day/Week	Total Hours per Week
		Class	Small Group	Individual	Regular	Special					
Lang. Devel.	goals 1,2			X		X	S/L Room	Com.Dis.Spec.	11/10/78	30"/dy,2dy/wk	1 hr/wk
Ind.Read.& Math	goals 3,4		X			X	Resource Room	Resource Teach.	11/9/78	60"/dy,5dy/wk	6 hrs.
Content Area	goals 5			X	X		Resource Room	Resource Tutor	11/11/78	30"/dy,5dy/wk	2 1/2hr.
Support		X					Classrooms	Generic Spec.	11/9/78	20"/day,3dy/wk	1 hr.
School Adjut.	goals 6,7			X		XX	Counseling Off.	School Psychol.	11/15/78	45"/dy,1dy/wk	11 1/4
Total hours of special education service delivery per week											

CRITERIA for movement to next less restrictive prototype: John can move to a .1 prototype: when his reading skills equal those of students in the lower 25% of any given class; when his independent study skills are equal to those of at least 25% of any given class; when his language skills are equal to student in the lower 25% of any given class; when his (see back)

IF OTHER THAN REGULAR, state the annual duration of program ________ days, daily duration of program ________ hours, and transportation plan:

REMARKS CONTINUED ON BACK OF FORM

interference from reading or visual-motor deficits.

John presently has a very poor self image. Efforts in the regular classroom should not identify John as "special" or single him out as the only one using special equipment or assignments.

John's main interest appears to be sports, especially ball games and participation on a hockey team.

(Criteria continuated)

attending techniques are managed in a non-disruptive manner, when his sense of security is not threatened by stress of prototype movement; when moved to a .1 prototype, John's teachers should accommodate him in the following ways: support instruction with visual examples (charts, diagrams, manipulatives, film strips, etc.); stress relationships especially relevance to other academic needs; stress content over form in written work; if written assignment is modified, accept only legible complete copy; allow flexibility within response; do not single him out unless in private.

CURRENT PERFORMANCE LEVEL	GENERAL STUDENT CENTERED GOALS	PRIORITY NUMBER	TEACHING APPROACH AND METHODOLOGY MONITORING AND EVALUATION TECHNIQUES SPECIALIZED EQUIPMENT AND MATERIALS
John can answer in simple sentences.	John will increase his responses from simple to compound sentences.	1	Help John develop ability to verbalize his actions. Record messages on tape. Use role playing and simulation. Provide visual experiences depicting relationships for John to verbalize Use color cubes for words to lengthen structure of sentences. Analyze recorded conversations with John.
John can comprehend concrete terms.	John's vocabulary comprehension will increase from concrete concepts to associative concepts.	2	Begin with examples showing obvious and progress toward more subtle differences. Begin with tangible characteristics. Use graphic representations calling attention to similarities of two concepts.
Presently John knows: alphabet vowels (aou) and consonants CV (fa, ga. da, etc.) VC (ep, et, os, etc.) CV & VC (t, ut, tu, at, etc.) CVC-one change (b,ba,bad,mab, etc.)	John will master patterns in decoding involving recognition and use of vowel and consonant forms.	3	Utilize a consonant chart and vowel pattern chart to introduce concepts. Use letter tiles and progress toward cursive writing. Use graded spelling list while he builds recognition of clusters.
Presently John can perform any addition task with 100% accuracy. He can complete subtraction problems with borrowing in the one's place.	John will master all components of the process of subtraction of whole numbers.	4	If necessary, prepare a work booklet for John to allow review. Use filmstrips and tapes for reinforcement cuisinaire rods for reinforcement of borrowing concept. Break down problems into understandable steps, corresponding to manipulative materials for clarity. Place problems on lined paper for clarity of numeral positions. Evaluation: Teacher-made and Standardized subtraction tests.

CURRENT PERFORMANCE LEVEL	GENERAL STUDENT CENTERED GOALS	PRIORITY NUMBER	TEACHING APPROACH AND METHODOLOGY MONITORING AND EVALUATION TECHNIQUES SPECIALIZED EQUIPMENT AND MATERIALS
Presently, John displays basic learning abilities. He has strong visual associative skills. He responds more easily in a non-verbal manner.	John will use his visual skills to increase his successful participation in academic subjects following modification of presentations.	5	Utilize charts, graphs, and visual aids while speaking. Teach John as if he were deaf. Use models and manipulative materials whenever possible. Devise alternative assignments and tests for John. Do not rely solely on class textbooks for instruction. Teacher-made tests in academic subjects.
Presently, John sees himself as a non-achiever and "different" as compared to siblings.	John will develop his self-image and become able to recognize his strengths and weaknesses.	6	Allow opportunities for self-assertiveness and expression. Help John realistically view his limitations and capabilities by asking him how he views himself in relation to his classroom situation. Systematic observation by parents and teachers.
Presently, John has some management techniques for dealing with frustration. When he is successfully involved in a task, he is not disruptive.	John will increase his ability to cope with frustration through learned techniques	7	Engineer situations where John can learn to delay gratification. Allow constant opportunities for expression. Involve John in formulating rules of conduct. Utilize methods so John can see himself as having control over his actions and environment.

Goal Number	Objective Number	SPECIFIC STUDENT CENTERED OBJECTIVES	Quarters during which objectives will be addressed			
			1	2	3	4
1	1	Given increased numbers of word cubes, John will devise complete sentences of increased complexity with 90% accuracy.	X			
1	2	Given a series of 10 pictures of increased detail, John will verbally describe the activities with 90% accuracy.		X		
1	3	Given a tape containing six responses, John will dictate sentences containing appropriate commonly used phrases with 90% accuracy.			X	
1	4	Given a tape on which to create an autobiography, John will verbally demonstrate the ability to use compound sentences with 100% accuracy.				X
2	1	Given a set of four common objects, John will verbally designate similarities and differences between those objects with 95% accuracy.	X			
2	2	Given a box of ten assorted pictures and ten objects, John will sort and describe them according to function with 95% accuracy.		X		
2	3	Given a set of fifteen prearranged pictures, John will verbally describe the basis of classification with 95% accuracy.			X	
2	4	Given a list of ten class names, John will verbally describe the common basis for members of a set with 95% accuracy.				X

Goal Number	Objective Number	SPECIFIC STUDENT CENTERED OBJECTIVES	Quarters during which objectives will be addressed			
			1	2	3	4
3	1	Given a series of twelve cards with CVC forms of ascending difficulty, John will select and write designated words with nonsense syllables with 100% accuracy. Example: sh, shi, shum, cham, chath, juth, etc.	X			
3	2	Given a series of ten dictated CVC patterns of increasing difficulty, John will write the dictated form with 100% accuracy. Examples: foum, floum, floump, puomp.		X		
3	3	Following review of consonant digraphs and trigraphs, given a list of ten dictated phonograms, John will write and then read the completed list of dictated phonograms with 95% accuracy. Example: ee, ea, oo, ou, oa, ow, er, ar, etc.			X	
3	4	Given ten dictated combinations of vowels plus endings, John will write and then read the completed list with 95% accuracy. Example: ang, ing, ong, eng, tion, sion, ink, onk, unk, etc:				X
4	1	Given a series of five manipulative sets of objects, John will arrange them according to the dissociative principle with 100% accuracy.	X			
4	2	Given ten examples of written subtraction problems consisting of three or more places and borrowing, John will calculate the solutions with 100% accuracy.		X		
4	3	Given ten examples of subtraction problems with zeroes in the minuend, John will calculate. the solution with 100% accuracy.			X	
4	4	Given ten examples of three step mathematical sentences, John will calculate the solution with 100% accuracy.				X

Goal Number	Objective Number	SPECIFIC STUDENT CENTERED OBJECTIVES	Quarters during which objectives will be addressed			
			1	2	3	4
5	1	Following explanation of concept utilizing visual and manipulative aids, John will demonstrate understanding of lesson through taped feedback of main points.	X			
5	2	Following conclusion of unit of study, John will demonstrate mastery of topic through a group project.		X		
5	3	Given opportunity for initial participation in small groups, John will demonstrate mastery of content area through presentation.			X	
5	4	Given an immediate stimulus as a model, John will produce legible written responses of increasing amount and detail.				X
6	1	Given the opportunity to explore value clarifications through priority listing, John will verbally demonstrate knowledge of his personal goals as feedback following listing with 100% accuracy.	X			
6	2	Given the role student in various stressful class simulations, John will act out acceptable means of gaining recognition with 100% accuracy.		X		
6	3	Given a simulated situation, John will verbally demonstrate recognition of the many roles of an individual with 90% accuracy.			X	
6	4	Given a videotaped role playing simulation, John will verbally select two examples of individuals displaying situational control and explain the reasons for control with 100% accuracy.				X

Goal Number	Objective Number	SPECIFIC STUDENT CENTERED OBJECTIVES	Quarters during which objectives will be addressed			
			1	2	3	4
7	1	Given a description of two situational circumstances, John will verbally predict consequences of an action with 100% accuracy.	X			
7	2	Given a role to play in a disruptive interaction, John will respond with verbal discrimination of appropriate and inappropriate reactions with 90% accuracy.		X		
7	3	Given a choice in a classroom situation, John will act out release of tension in an acceptable manner with 100% accuracy.			X	
7	4	Given a specifically stressful situation, John will verbally demonstrate the ability to consider alternative behavioral responses with 95% accuracy.				X

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Type of TEAM meeting: ____________
Meeting date: ____________
Plan covers the period from:
____________ to ____________
Liaison name: ____________
Liaison position: ____________

INDIVIDUALIZED EDUCATIONAL PLAN

Identification No.: ____________
School: ____________
Grade: ____________
Student's dominant language: ____________
Language of home: ____________
Prototype: ____________

Student Name: ____________ Birthdate: ____________ Home Phone No.: ____________

Parent(s) Name(s): ____________ Address: ____________ Work Phone No.: ____________

TEAM PARTICIPANTS

Signature, if in attendance	Name	Role/Assessment Responsibility
		Chairperson/

I certify that the goals stated in this plan are those recommended by the TEAM and that the indicated services will be provided.

Principal: ____________ (Signature/Date) Special Education Administrator: ____________ (Signature/Date)

If placement outside the local education agency is recommended, I certify that the facility, ____________ (Name/Address)
is able to provide the services stated in this plan.

Director of Accepting Facility: ____________ (Signature/Date)

RESPONSE – Circle one: Parent(s)/Guardian/Surrogate parent/or Student over age 18, sign next to your choice, and comment if you wish.

I accept the educational plan ____________ (Signature/Date) Comments: ____________

I do not accept the educational plan ____________ (Signature/Date) ____________

I postpone a decision until an independent evaluation is completed. ____________ (Signature/Date) ____________

STUDENT PROFILE:

ADDITIONAL INFORMATION:

SPECIAL EDUCATION SERVICE DELIVERY: Type of Service	Focus on Objective Numbers	Type of Setting					Location	Personnel	Projected Date Service Begins	Frequency and Duration of Service per Day/Week	Total Hours per Week
		Class	Small Group	Indivi-dual	Regular	Special					
Total hours of special education service delivery per week											

CRITERIA for movement to next less restrictive prototype:

IF OTHER THAN REGULAR, state the annual duration of program ________ days, daily duration of program____________ hours, and transportation plan:

CURRENT PERFORMANCE LEVEL	GENERAL STUDENT CENTERED GOALS	PRIORITY NUMBER	TEACHING APPROACH AND METHODOLOGY MONITORING AND EVALUATION TECHNIQUES SPECIALIZED EQUIPMENT AND MATERIALS

Goal Number	Objective Number	SPECIFIC STUDENT CENTERED OBJECTIVES	Quarters during which objectives will be addressed			
			1	2	3	4

CRITERION TEST

TRUE-FALSE

T F 1. According to Chapter 766, the review of goals and objectives should occur quarterly and annually.

T F 2. A review of the IEP can occur at any time.

T F 3. Revision of the IEP can occur only quarterly.

T F 4. Students should not participate in the review/revision process.

T F 5. Review is a continual, on-going process.

SHORT ANSWERS

1. List two reasons for a review.

2. List two individuals who must participate in the review meeting.

3. List two outcomes of the review process.

4. Outline the decision-making model of which the review/revision process is a phase.

5. What are at least three questions which should be addressed at the review/revision meeting(s)?